

STANDARD FORM 64  
October 1960  
U.S. CIVIL SERVICE COMMISSION  
General Personnel Manual Ch. 51  
50-102

**SECRET**

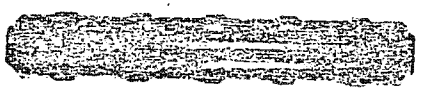
# Official Personnel Folder

**SECRET**

RETURN TO BUREAU OF PERSONNEL  
WASHINGTON, D.C. 20535  
FOR 75-134 FOR 24

437115

9 JUN 68  
9 JUN 68  
TERMINATED  
COPIED



SECRET

GROUP 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

REPRODUCTION MASTERS

BIOGRAF

BIOGRAPHIC PROFILE

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H a n d l e   W i t h   C a r e

SECRET  
(When Filled In)

# REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
27 Dec 72

|  |                                    |  |                                     |
|--|------------------------------------|--|-------------------------------------|
| 1. SERIAL NUMBER   |                                    | 2. NAME (Last, First, Middle)  |                                     |
| 3. NATURE OF PERSONNEL ACTION<br>RETIREMENT (CIARDS) VOLUNTARY               |                                    |  |                                     |
| 4. EFFECTIVE DATE REQUESTED<br>MONTH: 12, DAY: 31, YEAR: 73                  |                                    | 5. CATEGORY OF EMPLOYMENT<br>REGULAR   |                                     |
| 6. FUNDS   | 7. TAN AND NSCA<br>4221-0117 0000  | 8. LEGAL AUTHORITY (Completed by Office of Personnel)<br>Public Law 88-643 Section 233 |                                     |
| 9. ORGANIZATIONAL DESIGNATIONS<br>DDO/PLANS STAFF<br>CAREER MANAGEMENT GROUP |                                    | 10. LOCATION OF OFFICIAL STATION<br>WASH., D.C.  |                                     |
| 11. POSITION TITLE<br>OPS OFFICER - CH                                       |                                    | 12. POSITION NUMBER<br>0049  | 13. CAREER SERVICE DESIGNATION<br>D |
| 14. CLASSIFICATION SCHEDULE (G.S., I.M., etc.)<br>CS                         | 15. OCCUPATIONAL SERIES<br>0136.01 | 16. GRADE AND STEP<br>17 5   | 17. SALARY OR RATE<br>\$ 36,000     |

18. REMARKS  
*Supergade Blank*  
LAST WORKING DAY 28 Dec 73  
Coordinated with [ ] / ROB 27 December 1973

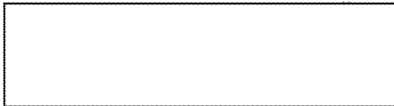
19A. SIGNATURE OF REQUESTING OFFICIAL  
*[Signature]*  
DATE SIGNED  
27 Dec 73

19B. SIGNATURE OF SUPERVISING OFFICER  
*[Signature]*  
DATE SIGNED  
27 Dec 73

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |                                     |   |  |  |  |                 |  |                                  |                                 |
|--|-------------------------------------|---|--|--|--|-----------------|--|----------------------------------|---------------------------------|
| 19. ACTION CODE<br>45 10   | 20. EMPLOY CODE                     | 21. OFFICE CODING<br>NUMERIC ALPHABETIC                               |  | 22. STATION CODE   | 23. INTELG/TE CODE                                     | 24. HOURES CODE | 25. DATE OF BIRTH  | 26. DATE OF GRADE<br>MO. DA. YR. | 27. DATE OF LEI.<br>MO. DA. YR. |
| 28. NTE EXPIRES<br>MO. DA. YR.   | 29. SPECIAL REFERENCE               | 30. RETIREMENT DATA<br>1- (C)<br>2- (D)<br>3- (E)<br>4- (F)<br>5- (G) |  | 31. SEPARATION DATA CODE<br>BJ, AB, G  | 32. CORRECTION/CORRELATION DATA<br>TYPE<br>MO. DA. YR. | EOD DATA →      |  | 33. SECURITY RFO. NO.            | 34. SER                         |
| 35. YET. PREFERENCE<br>CODE<br>0- NONE<br>1- 5 YR.<br>2- 10 YR.  | 36. SERV. COMP. DATE<br>MO. DA. YR. | 37. LONG. COMP. DATE<br>MO. DA. YR.                                   | 38. CAREER CATEGORY<br>CAP/RECY<br>PROV/TEMP<br>CODE     | 39. PEGU/HEALTH INSURANCE<br>CODE<br>0- WAIVER<br>1- TIC<br>2- TFC/WHI<br>3- FALCIBIBI | 40. SOCIAL SECURITY NO.<br>R 54-15 0814                |                 |  |                                  |                                 |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE<br>CODE<br>0- NO PREVIOUS SERVICE<br>1- NO BREAK IN SERVICE<br>2- BREAK IN SERVICE (LESS THAN 3 YEARS)<br>3- BREAK IN SERVICE (MORE THAN 3 YEARS) |                                     | 42. LEAVE CAT.<br>CODE  | 43. FEDERAL TAX DATA<br>FORM EXECUTED<br>1- YES<br>2- NO |  | 44. STATE TAX DATA<br>FORM EXECUTED<br>1- YES<br>2- NO |                 | 45. POSITION CONTROL CERTIFICATION<br>12-27-73 JFR JAN 1 |                                  |                                 |
| 46. D.O. APPROVAL<br><i>[Signature]</i>  |                                     |   |  |  |  |                 | DATE APPROVED<br>27 DEC 1973                             |                                  |                                 |

3 APR 1974



Dear Pete:

I am happy to send to you, under separate cover, your Agency Retirement Medallion. The Medallion is a tangible form of recognition and appreciation of your service to the Agency. It should serve as a lasting reminder of an honorable career, rewarding associations and the knowledge that you played your part in a vital activity.

Let me, therefore, add my congratulations and wish you the very best for the future.

Sincerely,

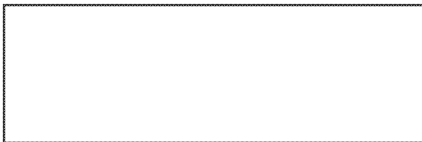
P. W. M. Janney  
Director of Personnel

Distribution:  
0 - Addressee  
1 - OPF

OP/RAD/ROB/[redacted] (26 March 1974)

Executive Registry  
74-522

26 JAN 1974



Dear Pete,

As you reach the end of your active career of Government service, I want to join your friends and colleagues in wishing you continued success and satisfaction in your retirement.

You have been privileged to face the challenge of important responsibilities during your many years of service to your country. The success with which you have met this challenge should be a source of lasting pride and satisfaction to you.

May I extend to you, personally and officially, my sincere appreciation for the important work you have done and my warmest hopes that you will find full enjoyment in the years ahead.

Sincerely,

/s/ W. E. Colby

W. E. Colby  
Director

Distribution:

- 0 - Addressee
- 1 - DDCI
- 1 - ER
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

Originator:

Director of Personnel

23 JAN 1974

OP/RAD/ROB/[redacted]/3257 (17-January 1974)

OFF

TSD

29 January 1974

MEMORANDUM FOR: Chief, Plans Staff  
 THROUGH : Deputy Director for Operations  
 SUBJECT : Distinction Medal  
 for [redacted]

The Honor and Merit Awards Board is pleased to notify you that the Distinguished Intelligence Medal has been approved for [redacted] and requests that you inform him of the award. Arrangements for presentation may be made with the Executive Secretary, Honor and Merit Awards Board, extension 3645, room 412, Magazine Building.

[redacted]

Recorder  
Honor and Merit Awards Board

- Distribution:
- OG 1 - Addressee
  - 1 - OPF w/forms 582 & 600
  - 1 - Exec Sec/HMAB
  - 1 - Recorder/HMAB

OPF

|   |  |   |                          |
|---|--|---|--------------------------|
| REPORT OF HONOR AND MERIT AWARDS BOARD  |  | Executive Registry<br>74-196  | DATE<br>18 December 1973 |
| The Honor and Merit Awards Board having considered a recommendation that:   |  |   |                          |
| OFFICE OF ASSIGNMENT<br>DO/CMG<br>RE AWARDED  |  | SD<br>D   | SCHEDULE GRADE<br>GS 17  |
|   |  | SEX<br>M  | TYPE EMPLOYEE<br>Staff   |
| Intelligence Medal of Merit   |  |   |                          |
| <input type="checkbox"/> FOR HEROIC ACTION ON   |  |   |                          |
| <input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD <b>September 1952 - December 1973</b>  |  |   |                          |
| <input type="checkbox"/> RECOMMENDS APPROVAL  |  | <input type="checkbox"/> DOES NOT RECOMMEND APPROVAL  |                          |
| <input checked="" type="checkbox"/> RECOMMENDS AWARD OF <b>Distinguished Intelligence Medal</b>   |  |   |                          |
| UNCLASSIFIED CITATION   |  |   |                          |
| <p>[redacted] is hereby awarded the Distinguished Intelligence Medal in recognition of his outstanding achievement with the Central Intelligence Agency for more than 23 years. Serving in a series of responsible senior positions both in headquarters and abroad, Mr. Wheeler has compiled an enviable record of achievement. Demonstrating deep integrity and total dedication, his performance has been characterized by creativity, and superb leadership. [redacted] devotion and professionalism have been evident throughout his career, reflecting the highest credit on him and the Federal service.</p> |  |   |                          |
| REMARKS   |  |   |                          |
| (Recommendation approved by DD/O on 10 December 1973)   |  |   |                          |
| APPROVED  |  | SIGNATURE   |                          |
| <i>H. Vernon K. Walters</i><br>DEPUTY DIRECTOR OF CENTRAL INTELLIGENCE<br>9 JAN 1974<br>DATE  |  | (signed on original)<br>F. W. M. Janney<br>TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD<br>B. L. Au 'n, Jr.<br>TYPED NAME OF RECORDER |                          |

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(When Filled In)

OFF

| RECOMMENDATION FOR HONOR OR MERIT AWARD<br>(Submit in triplicate - see HP 20-57)                           |   |  |                                  |       |
|--|---|--|----------------------------------|-------|
| <b>SECTION A PERSONAL DATA</b>   |   |  |                                  |       |
| 1. EMP. SER. NO.   | 2. NAME OF PERSON RECOMMENDED (Last, First, Middle) | 3. POSITION TITLE                                  | 4. GRADE                         | 5. SD |
|  |   | Ops Off/Chief                                      | GS-17                            | D     |
| 6. OFFICE OF ASSIGNMENT  | 7. OFFICE EST. (If this)                            | 8. STATION   |                                  |       |
| DDO/CMG  | 4103  | X Headquarters                                     |                                  |       |
| 9. HOME ADDRESS (No., St., City, State, ZIP Code)  |   | 10. HOME PHONE                                     | 11. CITIZENSHIP AND HOW ACQUIRED |       |
|  |   |  | U.S., Birth                      |       |
| 12. RECOMMENDED AWARD  |   | 13. IF BEING AWARDED RETIREMENT                    | 14. POSTHUMOUS                   |       |
| Intelligence Medal of Merit  |   | 31 December 1973                                   | YES X NO                         |       |
| 15. NAME OF NEXT OF KIN  | 16. RELATIONSHIP                                    | 17. HOME ADDRESS (No., St., City, State, ZIP Code) | 18. HOME PHONE                   |       |
|  | Wife  | same as above                                      | same                             |       |
| <b>SECTION B RECOMMENDATION FOR AWARD FOR HEROIC ACTION OR ACCEPTANCE OF HAZARD</b>                        |   |  |                                  |       |
| 19. WERE YOU AN EYEWITNESS TO THE ACT? YES NO  |   |  |                                  |       |
| PERSONNEL IN IMMEDIATE VICINITY OR WHO ASSISTED IN ACT OR SHARED IN SAME HAZARD:                           |   |  |                                  |       |
| 20. FULL NAME  | 21. ORGN. TITLE                                     | 22. GRADE  | 23. OFFICE OF ASSIGNMENT         |       |
|  |   |  |                                  |       |
| LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN ACT:            |   |  |                                  |       |
| 24. FULL NAME  | 25. AWARD RECOMMENDED                               |  |                                  |       |
|  |   |  |                                  |       |
| CONDITIONS UNDER WHICH ACT WAS PERFORMED:  |   |  |                                  |       |
| 26. LOCATION   | 27. INCLUSIVE DATES                                 | 28. TIME OF DAY                                    |                                  |       |
|  |   |  |                                  |       |
| 29. PREVAILING GEOGRAPHIC CONDITIONS AND OBSTACLES ENCOUNTERED   |   |  |                                  |       |
|  |   |  |                                  |       |
| 30. DATES FOR WHICH AWARD RECOMMENDED  | 31. ASSIGNMENT COMPLETED                            | 32. NOW IN SAME OR RELATED ASSIGNMENT              |                                  |       |
|  | YES NO  | YES NO   |                                  |       |
|  |   |  |                                  |       |
| <b>SECTION C RECOMMENDATION FOR AWARD FOR ACHIEVEMENT, SERVICE, OR PERFORMANCE</b>                         |   |  |                                  |       |
| 33. DO YOU HAVE PERSONAL KNOWLEDGE OF THE SERVICE OR PERFORMANCE? YES NO                                   |   |  |                                  |       |
| 34. OFFICIAL ASSIGNMENT OF PERSON RECOMMENDED AT TIME OF SERVICE OR PERFORMANCE                            |   |  |                                  |       |
| Ops Officer/Chief  |   |  |                                  |       |
| 35. COMPONENT OR STATION (Designation and location)  |   |  |                                  |       |
| CMG/   |   |  |                                  |       |
| 36. DUTIES AND RESPONSIBILITIES OF ASSIGNED POSITION   |   |  |                                  |       |
| Chief,   |   |  |                                  |       |
| 37. INCLUSIVE DATES FOR WHICH RECOMMENDED  | 38. ASSIGNMENT COMPLETED                            | 39. NOW IN SAME OR RELATED ASSIGNMENT              |                                  |       |
| Sept 1952-December 1973  | YES X NO  | YES X NO   |                                  |       |
| PERSONNEL WHO ASSISTED OR CONTRIBUTED SUBSTANTIALLY TO THE SERVICE OR PERFORMANCE                          |   |  |                                  |       |
| 40. FULL NAME  | 41. ORGN. TITLE                                     | 42. GRADE  | 43. OFFICE OF ASSIGNMENT         |       |
|  |   |  |                                  |       |
| LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN THE PERFORMANCE |   |  |                                  |       |
| 44. FULL NAME  | 45. TYPE OF AWARD                                   |  |                                  |       |
|  |   |  |                                  |       |



(When filled in)

OFF

SECTION D

NARRATIVE DESCRIPTION

Award for Merit Action, or Acceptance of Hazard: Was act voluntary? Describe why act was outstanding, and if it was more than normally expected. Explain why, and how. If an aerial or marine operation, describe type and position of craft, crew position of individual, and all unusual circumstances. Indicate results of the act. Enclose unclassified citation.

Award for Achievement, Service, or Performance: State character of service during period for which recommended. (Give complete description of administrative, technical, or professional duties and responsibilities if not covered in Section C; include dates of assignment and relief.) What did the individual do that merits the award? Why was this outstanding when compared to others of like grade and experience in similar positions or circumstances? If appropriate, include production records and assistance rendered by other persons or units. What obstacles were encountered or overcome? Indicate results of achievement, service, or performance. Include reference to Fitness Reports, Letters of Commendation, or other documentation already on file which supports this recommendation. Enclose unclassified citation.

[Redacted]

[Redacted] outstanding characteristics are his integrity and total dedication. He is a natural leader, bright and original. He has a creative mind, is articulate and rational. He has excellent recall, is a gifted administrator and manager. He is a searching individual who is totally committed and has the high regard of most of the elements comprising the DDO. During his tenure he has received laudatory commendations for his efforts.

[Redacted] has made a valuable contribution to the Agency during his extended career and it is fitting that upon retirement after such a distinguished career, he be awarded the Intelligence Medal of Merit.

CONTINUED ON ATTACHED SHEET

46. ENCLOSURES (List individually) IF ORIGINATOR IS NOT AN EYEWITNESS OR DOES NOT HAVE PERSONAL KNOWLEDGE OF THE ACT OR PERFORMANCE. ATTACH AFFIDAVITS OF EYEWITNESS OR INDIVIDUALS HAVING PERSONAL KNOWLEDGE OF THE FACTS.

1. PROPOSED CITATION
- 2.
- 3.

|  |  |                           |
|--|--|---------------------------|
| 47. RECOMMENDATION INITIATED BY<br><br>[Redacted]                                    | 48. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMEN-<br>TION<br><br>[Redacted] | 49. DATE<br><br>10 Dec 77 |
| SECTION E RECOMMENDATION FORWARDED THROUGH OFFICIALS CONCERNED FOR THEIR INFORMATION |  |                           |
| 50. HEAD OF DDO CAREER SERVICE<br>(Career Service of nominee)                        | TITLE AND SIGNATURE<br><br>See Item # 52                                       | DATE                      |
| 51. DEPUTY DIRECTOR OF CAREER SERVICE  | TITLE AND SIGNATURE<br><br>See Item # 52                                       | DATE                      |
| 52. DEPUTY DIRECTOR OF OPERATING COMPONENT   | TITLE AND SIGNATURE<br><br>William E. Nelson                                   | DATE<br><br>11 Dec 77     |

SECRET

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

18 September 1973

1. SERIAL NUMBER 2. NAME (Last-First-Middle)

3. NATURE OF PERSONNEL ACTION 4. EFFECTIVE DATE REQUESTED 5. CATEGORY OF EMPLOYMENT

Reassignment 09/18/73 Regular

6. FUNDS 7. FINANCIAL ANALYSIS NO. CHARGEABLE 8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS 10. LOCATION OF OFFICIAL STATION

DDO/Plans Staff Career Management Group Washington, D. C.

11. POSITION TITLE 12. POSITION NUMBER 13. CAREER SERVICE DESIGNATION

Ops Officer-Ch (17) 0049 D

14. CLASSIFICATION SCHEDULE (GS, LR, etc.) 15. OCCUPATIONAL SERIES 16. GRADE AND STEP 17. SALARY OR RATE

GS 0136-01 17/4 \$36,000

18. REMARKS

Reassigned from DDO/PS/CMG Pending Reassignment

*Robertson*

*Super blurb*

19A. SIGNATURE OF REQUESTING OFFICIAL 19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER

DATE SIGNED 7/17/73

19. ACTION CODE 20. EMPLOY CODE 21. OFFICE CODE 22. STATION CODE 23. CATEGORY CODE 24. POSITION CODE 25. DATE OF BIRTH 26. BIRTH IN SERVICE 27. DATE OF IED 28. SEX 29. SPECIAL REFERENCE 30. OCCUPATIONAL DATA 31. SEPARATION DATA CODE 32. OCCASIONAL CERTIFICATION DATA 33. SECURITY NO. 34. SEX 35. VET. PREFERENCE 36. VET. COMP. DATE 37. LEAVE DATA 38. CAREER CARRIER 39. SOCIAL SECURITY NO. 40. SOCIAL SECURITY NO. 41. MEDICAL OFFICIAL GOVERNMENT SERVICE 42. LEAVE DATA 43. FEDERAL TAX DATA 44. SOCIAL SECURITY DATA 45. POSITION CONTROL CERTIFICATION 46. DATE APPROVED

37 10 3702PS 75013

9-21-77

SECRET

SECRET  
(When Filled In)

# REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
9 July 1973

1. SERIAL NUMBER  
2. NAME (Last-First-Middle)

3. NATURE OF PERSONNEL ACTION  
**REASSIGNMENT**

4. EFFECTIVE DATE REQUESTED  
MONTH DAY YEAR  
**07 01 73**

5. CATEGORY OF EMPLOYMENT  
**REGULAR**

6. PAGES  
X V TO V  
OF TO V

7. PAN AND NSCA  
**0117**  
**4221-2974 0000**

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS  
**DDO/PLANS STAFF**  
**UNASSIGNED Career management Group**  
*Pending Reassignment*

10. LOCATION OF OFFICIAL STATION  
**WASH., D.C.**

11. POSITION TITLE  
**OPS OFFICER CH.**

12. POSITION NUMBER  
**0000**

13. CAREER SERVICE DESIGNATION  
**D**

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)  
**GS**

15. ORGANIZATIONAL SERIES  
**0136.01**

16. GRADE AND STEP  
**17 4**

17. SALARY OR RATE  
**\$36000**

18. REMARKS  
**FROM: DDP/ /BY COMP/9997**

19. SIGNATURE OF REQUESTING OFFICIAL  
DATE SIGNED  
100 [Signature] 16 July 73

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|   |                       |                       |                          |                               |                       |
|---|-----------------------|-----------------------|--------------------------|-------------------------------|-----------------------|
| 20. OFFICE CODES<br>11. OFFICE CODE<br>12. SECTION CODE | 21. INTEGRAL CODE     | 22. GRADE AND STEP    | 23. DATE OF BIRTH        | 24. DATE OF GRADE             | 25. SEX OF EMP        |
| 3010 30135 PS 75013                                     |                       |                       |                          |                               |                       |
| 26. NO. EMPLOYED  | 27. SPECIAL REFERENCE | 28. RETIREMENT DATA   | 29. SEPARATION DATA CODE | 30. CORRECTION/COMPLAINT DATA | 31. SECURITY RES. NO. |
|   |                       |                       |                          | EOD DATA                      |                       |
| 32. RES. FEEDBACK                                       | 33. SECT. EMP. DATE   | 34. LEADS (EMP. DATE) | 35. CAREER CATEGORY      | 36. FEIGHT/HEALTH INSURANCE   | 37. RES. SECURITY NO. |
|   |                       |                       |                          |                               |                       |
| 38. PERSONNEL OFFICER GOVERNMENT SERVICE                | 39. SEPAR. CAT.       | 40. FEEDBACK DATA     | 41. SECT. EMP. DATE      | 42. HEALTH INS. CODE          | 43. STATE EMP. DATE   |
|   |                       |                       |                          |                               |                       |
| 44. PROGRESS CONTROL CERTIFICATION                      | 45. [Signature]       | 46. [Signature]       | 47. [Signature]          | 48. [Signature]               | 49. [Signature]       |
| 7-16-73 LL  |                       |                       |                          |                               | 24 July 73            |

SECRET

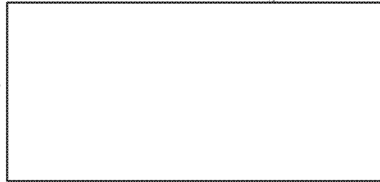
31 JAN 1973

Dear [redacted]

At the direction of the Deputy Director for Plans you served from 6 November to 17 November 1972 as a member of the Clandestine Service [redacted] Sub-Panel convened for the purpose of evaluating GS-12 Staff and Career Agent personnel [redacted]. I know that this work was particularly demanding. Your full-time participation and the diligent application of your professional experience were decisive factors in the successful accomplishment of this aspect of the [redacted] missions.

I wish to commend you personally for your contribution to our evaluation procedures each phase of which helps to strengthen the Clandestine Service Career Service.

A copy of this letter will be included in your official personnel file.



SECRET

[redacted]

C-O-N-F-I-D-E-H-T-I-A-L

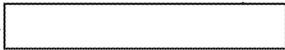
12 July 1972

Dear Pete,

I want to thank you personally for your fine work as a member of the GS-15 Evaluation Board which convened from 15 May to 16 June 1972. I know that this work has been particularly demanding. Your full-time participation and diligent application of your professional experience have been decisive factors in the successful accomplishment of the Board's missions. I know that your recommendations will provide a reliable base for the Clandestine Service Career Service Board and myself in arriving at a final promotion list.

Your wise and energetic participation in the evaluation process has helped to strengthen the Clandestine Service by objectively identifying those officers whose performance, qualifications and potential mark them as especially fitted for senior positions of leadership.

Thomas H. Karabessines  
Deputy Director for Plans



C-O-N-F-I-D-E-H-T-I-A-L

SECRET  
(When Filled In)

# REQUEST FOR PERSONNEL ACTION

DATE PREPARED  
22 February 1972

1. SERIAL NUMBER / 2. NAME (Last-First-Middle)  
[Redacted]

3. NATURE OF PERSONNEL ACTION  
Reassignment

4. EFFECTIVE DATE REQUESTED  
MONTH: 03 | DAY: 09 | YEAR: 72

5. CATEGORY OF EMPLOYMENT  
Regular

6. FUNDS  
X V TO V  
O TO V

7. FINANCIAL ANALYSIS NO. CHARGEABLE  
2231-4148

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS  
DDP/  
Development Complement

10. LOCATION OF OFFICIAL STATION  
Washington, D. C.

11. POSITION TITLE  
Ops Officer - Ch

12. POSITION NUMBER  
9997

13. CAREER SERVICE DESIGNATION  
D

14. CLASSIFICATION SCHEDULE (GS, LB, etc.)  
GS

15. OCCUPATIONAL SERIES  
0136.01

16. GRADE AND STEP  
17 4

17. SALARY OR RATE  
\$ 36,000

18. REMARKS  
\*Koyne  
From MPS, Position # 0001  
Concur: [Redacted] (telecoord)  
MPS

cc: Payroll  
cc: Security  
DB 3/20

DATE SIGNED: 27 Feb 72  
DATE SIGNED: 9 MAR 1972

### SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |                       |  |                          |                                |                         |                   |                   |                       |
|--|-----------------------|--|--------------------------|--------------------------------|-------------------------|-------------------|-------------------|-----------------------|
| 19. ACTION CODE                          | 20. EMPLOY. CODE      | 21. OFFICE CODES<br>NUMERIC ALPHABETIC | 22. STATION CODE         | 23. INTEGRATE CODE             | 24. HOURS CODE          | 25. DATE OF BIRTH | 26. DATE OF GRADE | 27. DATE OF LST       |
| 32                                       | 10                    | 57497711001A                           | 75013                    |                                | 1                       |                   |                   |                       |
| 28. NTE EXPIRES                          | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA                    | 31. SEPARATION DATA CODE | 32. CORRECTION/CONVERSION DATA | EOD DATA                |                   |                   | 33. SECURITY REQ. NO. |
|  |                       |  |                          |                                |                         |                   |                   | 34. SER               |
| 35. YET. PREFERENCE                      | 36. SEPT COMP DATE    | 37. LOB6. COMP. DATE                   | 38. CAREER CATEGORY      | 39. FEGLI/HEALTH INSURANCE     | 40. SOCIAL SECURITY NO. |                   |                   |                       |
|  |                       |  |                          |                                |                         |                   |                   |                       |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE | 42. LEAVE CAT. CODE   | 43. FEDERAL TAX DATA                   |                          | 44. STATE TAX DATA             |                         |                   |                   |                       |
|  |                       |  |                          |                                |                         |                   |                   |                       |
| 45. POSITION CONTROL CERTIFICATION       | 46. DATE OF APPROVAL  |  |                          | 47. DATE APPROVED              |                         |                   |                   |                       |
|  | * From MPS<br>3-9-72  |  |                          | Harry B. Fisher<br>15 Mar 72   |                         |                   |                   |                       |

FORM 1152 USE PREVIOUS EDITION

SECRET

20 MAR 1972

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

(When Filled In)

| REQUEST FOR PERSONNEL ACTION   |                 |                       |                         |  |                                | DATE PREPARED   |
|--|-----------------|-----------------------|-------------------------|--|--------------------------------|---|
| 1. SERIAL NUMBER   |                 |                       |                         |  | 2. NAME (Last-First-Middle)    |   |
| 3. NATURE OF PERSONNEL ACTION  |                 |                       |                         |  |                                | 4. EFFECTIVE DATE REQUESTED                           |
| Promotion  |                 |                       |                         |  |                                | MONTH DAY YEAR<br>11 28 71                            |
| 5. FUNDS   |                 |                       |                         |  |                                | 6. LEGAL AUTHORITY (Completed by Office of Personnel) |
| X V TO V   |                 |                       |                         |  |                                | 7. FINANCIAL ANALYSIS NO. CHARGEABLE                  |
| CP TO V  |                 |                       |                         |  |                                | 2221-2886-0000  |
| 9. ORGANIZATIONAL DESIGNATIONS   |                 |                       |                         |  |                                | 10. LOCATION OF OFFICIAL STATION                      |
| DDP/Missions & Programs Staff<br>Office of the Chief   |                 |                       |                         |  |                                | Washington, DC  |
| 11. POSITION TITLE   |                 |                       |                         | 12. POSITION NUMBER                                | 13. CAREER SERVICE DESIGNATION |   |
| Ops Officer - Ch   |                 |                       |                         | 0001   | D                              |   |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)   |                 |                       | 15. OCCUPATIONAL SERIES | 16. GRADE AND STEP                                 | 17. SALARY OR RATE             |   |
| GS   |                 |                       | 0136.01                 | GS-17 4  | \$ 35,801                      |   |
| 18. REMARKS  |                 |                       |                         |  |                                |   |
| cc: Payroll  |                 |                       |                         |  |                                |   |
| 18A. SIGNATURE OF REQUESTING OFFICIAL  |                 |                       | DATE SIGNED             | 18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER |                                | DATE SIGNED   |
|  |                 |                       |                         |  |                                | 24 Nov 71   |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |                 |                       |                         |  |                                |   |
| 19. ACTION CODE  | 20. EMPLOY CODE | 21. OFFICE CODES      |                         | 22. SECTION CODE                                   | 23. INTEGRAL CODE              | 24. HOURS CODE  |
| 22   | 10              | 52100                 | MPS                     | 15013  |                                | 1   |
| 25. DATE OF BIRTH  |                 | 26. DATE OF GRADE     |                         | 27. DATE OF IET                                    |                                |   |
| MO. DA. YR.  |                 | MO. DA. YR.           |                         | MO. DA. YR.  |                                |   |
|  |                 | 11 28 71              |                         | 11 28 71   |                                |   |
| 28. WTE EXPIRES  |                 | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA     |  | 31. SEPARATION DATA CODE       | 32. CORRECTION/CANCELLATION DATA                      |
| MO. DA. YR.  |                 |                       | CODE                    |  |                                |   |
|  |                 |                       |                         |  |                                |   |
| 33. VET. PREFERENCE  |                 | 36. SERV. COMP. DATE  |                         | 37. LEAVE COMP. DATE                               |                                | 38. CAREER CATEGORY                                   |
| CODE   |                 | MO. DA. YR.           |                         | MO. DA. YR.  |                                | CODE  |
|  |                 |                       |                         |  |                                |   |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE   |                 |                       | 47. LEAVE CAT. CODE     |  | 43. FEDERAL TAX DATA           |   |
| CODE   |                 |                       | CODE                    |  | CODE                           |   |
| 0-NO PREVIOUS SERVICE<br>1-NO ENTRY IN SERVICE<br>2-ENTRY IN SERVICE (LESS THAN 3 YEARS)<br>3-ENTRY IN SERVICE (MORE THAN 3 YEARS) |                 |                       |                         |  | NO. TAX EXEMPTIONS             |   |
|  |                 |                       |                         |  | NO. EXECUTED                   |   |
|  |                 |                       |                         |  | CODE                           |   |
|  |                 |                       |                         |  | STATE TAX DATA                 |   |
|  |                 |                       |                         |  | CODE                           |   |
|  |                 |                       |                         |  | STATE CODE                     |   |
|  |                 |                       |                         |  | STATE CODE                     |   |
| 45. POSITION CONTROL CERTIFICATION   |                 |                       |                         | 46. O.P. APPROVAL                                  |                                | DATE APPROVED   |
| 11-26-71 wj  |                 |                       |                         | Harry B. Fisher                                    |                                | 1 Dec 71  |

SECRET

GAC EMPLOYERS USE ONLY. DOWNLOADS AND REPRODUCTION

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

5 March 1971

|                  |                             |
|------------------|-----------------------------|
| 1. SERIAL NUMBER | 2. NAME (Last-First-Middle) |
|                  |                             |

|  |   |   |
|--|---|---|
| 3. NATURE OF PERSONNEL ACTION<br>Reassignment and Transfer to<br>Vouchered Funds | 4. EFFECTIVE DATE REQUESTED<br>MONTH DAY YEAR<br>03 21 71 | 5. CATEGORY OF EMPLOYMENT<br>Regular                  |
| 6. FUNDS<br>V TO V<br>X OF TO V<br>OF TO OF                                      | 7. FINANCIAL ANALYSIS NO.<br>CHARGEABLE<br>1221-2886      | 8. LEGAL AUTHORITY (Completed by Office of Personnel) |

|  |   |
|--|---|
| 9. ORGANIZATIONAL DESIGNATIONS<br>DDP/Missions and Programs Staff<br>Office of the Chief | 10. LOCATION OF OFFICIAL STATION<br>Washington, D. C. |
|--|---|

|  |                             |                                     |
|--|-----------------------------|-------------------------------------|
| 11. POSITION TITLE<br>Ops Officer - Ch | 12. POSITION NUMBER<br>0001 | 13. CAREER SERVICE DESIGNATION<br>D |
|--|-----------------------------|-------------------------------------|

|  |                                    |                            |                                   |
|--|------------------------------------|----------------------------|-----------------------------------|
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)<br>GS | 15. OCCUPATIONAL SERIES<br>0136.01 | 16. GRADE AND STEP<br>16 6 | 17. SALARY OR RATE<br>\$ 32,819 ✓ |
|--|------------------------------------|----------------------------|-----------------------------------|

18. REMARKS  
From MPS Position # 0008

cc: Security  
cc: Payroll

|                                       |                           |  |                        |
|---------------------------------------|---------------------------|--|------------------------|
| 19A. SIGNATURE OF REQUESTING OFFICIAL | DATE SIGNED<br>5 Mar 1971 | 19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER | DATE SIGNED<br>2/27/71 |
|---------------------------------------|---------------------------|--|------------------------|

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|   |                                     |   |  |  |  |                                  |                                  |                                |
|---|-------------------------------------|---|--|--|--|----------------------------------|----------------------------------|--------------------------------|
| 19. ACTION CODE<br>16   | 20. EMPLOY. CODE<br>10              | 21. OFFICE CODING<br>NUMERIC 52100<br>ALPHABETIC MPS      | 22. STATION CODE<br>75013  | 23. INTERG. CODE   | 24. HOURS CODE   | 25. DATE OF BIRTH<br>MO. DA. YR. | 26. DATE OF GRADE<br>MO. DA. YR. | 27. DATE OF LEI<br>MO. DA. YR. |
| 28. NTE EXPANS. MO. DA. YR.   | 29. SPECIAL REFERENCE               | 30. RETIREMENT DATA<br>1-ESC<br>2-OPEN<br>3-PLA<br>4-NONE | 31. SEPARATION DATA CODE   | 32. CORRECTION/CANCELLATION DATA<br>TYPE MO. DA. YR.                           | EOD DATA →   |                                  | 33. SECURITY REQ. NO.            | 34. SEX                        |
| 35. YET. PREFERENCE CODE<br>1-ROSE<br>2-15 PT.<br>3-15 PT.  | 36. SERV. CORP. DATE<br>MO. DA. YR. | 37. LONG. COMP. DATE<br>MO. DA. YR.                       | 38. CAREER CATEGORY<br>CAREER/PROF/TEMP CODE                                   | 39. FEGLI/HEALTH INSURANCE<br>0-WAIVER<br>1-REG<br>2-RESIDUARY<br>3-INELIGIBLE | 40. SOCIAL SECURITY NO.  |                                  |                                  |                                |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE<br>0-NO PREVIOUS SERVICE<br>1-NO BREAK IN SERVICE<br>2-BREAK IN SERVICE (LESS THAN 3 YEARS)<br>3-BREAK IN SERVICE (MORE THAN 3 YEARS) |                                     | 42. LEAVE CAT. CODE                                       | 43. FEDERAL TAX DATA<br>FORM EXECUTED CODE NO. TAX EXEMPTIONS<br>1-FES<br>2-NO |  | 44. STATE TAX DATA<br>FORM EXECUTED CODE NO. TAX STATE CODE EXEMP. |                                  |                                  |                                |

|  |                                      |                             |
|--|--------------------------------------|-----------------------------|
| 45. POSITION CONTROL CERTIFICATION<br>3-2-71 | 46. O.P. APPROVAL<br>Harry B. Fisher | DATE APPROVED<br>8 March 71 |
|--|--------------------------------------|-----------------------------|



UNITED STATES GOVERNMENT

U.S. CIVIL SERVICE COMMISSION

# Memorandum

**Subject:** Completion of "The Winter Program for FEI Executives" at the Federal Executive Institute in Charlottesville, Virginia  
**From:** *Nancy W. Dalton*  
Nancy W. Dalton  
Registrar, Federal Executive Institute

MAR 4 1971

Date:  
In Reply Refer To:

Your Reference:

**To:** [Redacted]  
Registrar, Office of Training  
Central Intelligence Agency  
Washington, D. C. 20505

This is official notice that [Redacted] has satisfactorily completed the "Winter Program for FEI Executives" at the Federal Executive Institute, Charlottesville, Virginia. This session of that educational program was held from February 28 - March 2, 1971. One copy of this memorandum is intended for filing in the employee's official personnel folder and the other copy for routing to the employee's immediate supervisor.

RECEIVED  
MAR 4 1971  
21998  
23 MAR 1971

Keep Freedom in Your Future With U.S. Savings Bonds

SECRET

23 February 1971

MEMORANDUM FOR: Secretary, CSCS Board

SUBJECT: Recommendation for Promotion -

[REDACTED]

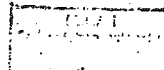
1. As one of the final acts in my CIA career I want to bring to your attention and add my strong concurrence and recommendation to two (2) recorded recommendations for the promotion of [REDACTED] to the grade GS-17. I find it hard to imagine a more persuasive recommendation for this action than that forwarded by my predecessor in June 1969 (Attached). I can imagine [REDACTED] feeling when he prepared the second recommendation in February 1970 (Attached). And yet, I find in February 1971 there has still been no action. In the year that has passed this promotion has become even more deserved, for despite the natural disappointment accompanying such a continuing lack of recognition, there has been no diminution of enthusiasm, no lowering of standards, and the CS is clearly better managed because of his continuing efforts. Were these two previous recommendations not so clear cut and descriptive, I would conclude that those in control simply do not know what this officer does and has done. Knowing what he does and how he does it should not continue to be unrewarded and, hence, I add my strongest recommendation for early and favorable action.

2. This officer has performed in a most outstanding manner, as testified in his fitness reports by my predecessor, and certainly during my tenure as Chief, MPS for the past 12 months.

[REDACTED]

Chief, Missions and Programs Staff

SECRET



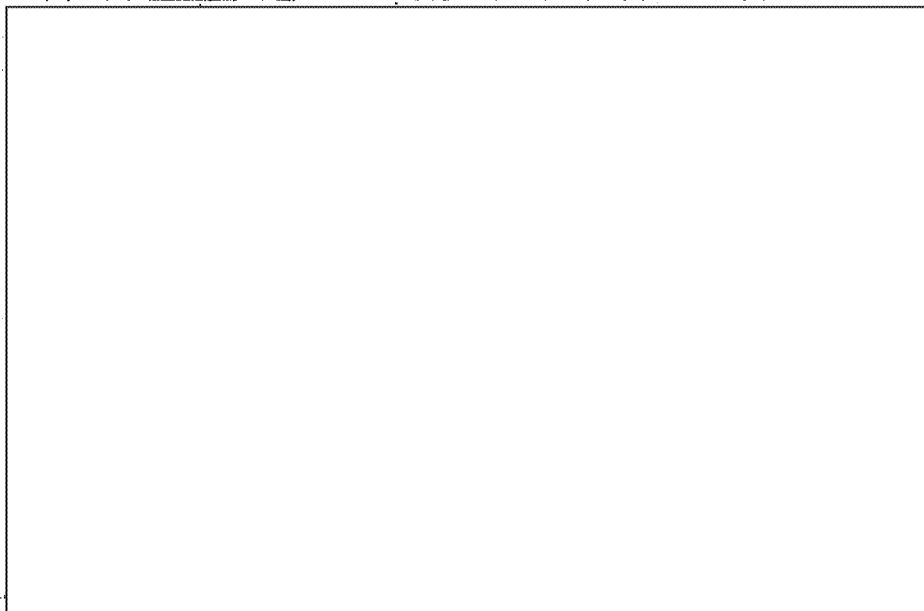
~~SECRET~~

5 JUN 1969

MEMORANDUM FOR: Secretary, Clandestine Service Career Service Board

SUBJECT: Recommendation for the Promotion of [redacted] to GS-17

1. It is recommended that [redacted] be promoted to GS-17.



4. In his present position as Chief of Programs Group in the Missions and Programs Staff, [redacted] is responsible for liaison between the CS and the CPFB on the PPS System and non-budgetary matters; installing the EPB System

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within the CS; advising and assisting CS components in the preparation of Operating Directives and the program portions of the annual responses to the Program Call; chairing the Program Review Panel; preparing and/or coordinating special studies and surveys on operational programs; coordinating and preparing the annual DDP report to the PFIAB; preparing the annual DDP briefing of the DCI on CS problems and progress; and, as required, advising CS components on the requirements of PPBS that need to be addressed in CS documents requiring DCI or Executive Director-Comptroller action.

5. In his previous assignment [redacted] was detailed to OEPB to give that office, in the preparation of Agency programs for submission to the Bureau of the Budget, a better understanding of clandestine collection and covert action, to help that office better review and integrate CS programs in Agency programs, and to give him a broad view of the PPB System and Agency management in both of which he had shown considerable interest. His performance in that office was rated "Strong," and it was on that performance and on his genuine enthusiasm and interest in management generally that his services were sought for OPS.

6. In the performance of his duties as Chief, OPS/PRG he made immediate use of his long experience in and knowledge of CS operations, the experience and knowledge gained in OEPB, his formal education in the PPB System, and a strong belief in and desire to put to work within the CS certain concepts of that system for general and specific management improvement. Given the idiosyncrasies of the CS, he recognized early that in order to make the PPB system work effectively knowledge of the "why" and "how" of that system must be possessed at every decision-making level. With limitless energy and enthusiasm he set about "preaching the gospel" from division chief to case officer. Whenever and wherever a formal group in assembled and management is a topic for discussion, the Office of Training can count on him to drop everything and hold forth on the subject, be it the Senior Management and Planning Course (whether for supergrades or below), Station Chief Conferences, the CS Senior Seminar (now in session) and the like. Acting as the DDP/TRD's right arm to encourage attendance at the Senior Management and Planning Course he has crusaded with division and staff chiefs for the attendance of certain of

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their key employoon. To date upwards of 100 from the CS have attended that course with many more to follow. With some of those same senior officials he has argued the benefits ultimately to accrue to their components from the temporary assignment of a senior key official for a year or two to MPS and/or CPPB and eventual return to the mother component. One such arrangement, with duty in CPPB, has just been completed. His tactful, understanding, friendly, businesslike, professional and competent handling of the chairmanship of the PRP and the reviews of the Operating Directive and country activities conducted by that Panel leaves little to be desired. Regarding the PPB System, he reads everything, pro and con, that comes to his attention, and he has spent a fair sum out of his own pocket to build a library on the subject. He has persuaded potential converts to the system to read those books, magazines, periodicals and pamphlets to the end that most of that library is on constant loan. His insatiable appetite for news on current as well as historical domestic and foreign matters, his excellent sense of humor, and his genuine friendliness are invaluable assets in his present assignment inasmuch as they have given him such a wide range of acquaintances, in and out of the CS, as to open wide the door for discussion on MPS responsibilities that are anything but soxy. He is so highly regarded by his contacts in the divisions and staffs of the CS and in CPPB that his advice and guidance are constantly sought. He gives of his time and energy willingly, regardless of the grade of the individual or the magnitude of the problem. His enthusiasm is catching and he sets an excellent example for subordinates, equals and superiors as well.

7. In view of the above, [redacted] a broadgauged, fast moving, competent, dedicated, sincere and friendly individual who has not yet reached his full potential, whose goal is to make the Clandestine Service the best managed directorate in CIA, and who will soon have served five years in grade, is strongly recommended for promotion to GS-17.

[redacted]  
Chief, Missions and Programs Staff

SECRET

9 February 1970

MEMORANDUM FOR: Secretary, Clandestine Service  
Career Service Board

SUBJECT: Recommendation for the Promotion  
of [redacted] to GS-17

1. It is recommended that [redacted] be promoted to the grade GS-17.

2. By memorandum dated 5 June 1969 the undersigned recommended [redacted] for promotion. In that memorandum was set out the career of [redacted] from the date he completed college (1942) until June 1969, and was described his wartime (1942-1946), immediate post-war (1946-1952) and Agency (1952-to June 1969) experience, all in the field of intelligence. Since it is the opinion of the undersigned that the Board should have the benefit of all the facts stated in that memorandum and since there is no change in the contents thereof, I hereby incorporate by reference the memorandum of 5 June 1969, make it part hereof and attach it hereto as a significant part of the present memorandum.

3. The time passed since 5 June 1969 has served only to confirm my conviction in Mr. Wheeler's true value to the CS. He has continued the strong leadership of the Program Review Panel and his subordinates. His unbounded energy and incessant championing of the applicable principles of the PPS System have resulted in office chiefs or other most senior officials appearing before the last Program Review Panel apparently interested and better prepared than ever before. His obvious sincerity and friendly and intelligent approach to the job have convinced many of the need for the better management of their affairs. This is no mean accomplishment in a world where the normal human resents

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even constructive criticism. [redacted] is so dedicated to making the CS the best managed component in the Agency that he continues to spend his own earnings on books and periodicals on the subject of management and to encourage interested parties to read them and pass them on to others.

4. The undersigned is aware that for the past six (6) months a private interest has dangled an impressive carrot in front of [redacted] in an attempt to induce him to retire and represent overseas the interests of that private concern. This fact is not to be considered by the Board as a sword of Damocles. It is simply to bring to the Board's attention that if a promotion at this time should serve to dissuade [redacted] from accepting the proffered job, the Board would have been instrumental in retaining for the CS in the management field one of the most dedicated, friendly, readily accepted, knowledgeable, industrious and qualified officers in the Agency.

5. In view of paragraph 3 above, the contents of the attachment hereto, and his potential for further growth, [redacted] is strongly recommended for promotion to Grade GS-17.

[redacted]  
Chief, Missions and Programs Staff

Attachment: a/s

ADMINISTRATIVE INTERNAL USE ONLY

1970

MEMORANDUM FOR :   
THROUGH : Head of Career Service  
SUBJECT : Retirement Planning

1. In order to assist employees in planning for their eventual retirement, it is the practice of the Agency to notify each employee at a point in service five years prior to the date of scheduled retirement. I am, therefore, taking this opportunity to advise you that you are scheduled to retire in October 1975.
2. The prospect of retirement from the Agency deserves serious thought and careful planning so that you may make the transition to the next phase of life with purpose and confidence. To assist you in this regard, the Agency will make available to you various resources which are attuned to the needs of prospective retirees. In October 1970, the Agency will conduct a Retirement Information Seminar to which you will be invited. Your spouse, if you are married, may accompany you to this seminar. Following the seminar, you will be invited by the Retirement Counselor for your Directorate to an individual pre-retirement counseling session (or more than one, if you wish); this phase of retirement planning will be tailored solely to your own particular situation and circumstances and will be within the context of the retirement system under which you will retire. The individual counseling sessions are intended to give you a wide range of information on such matters as estimates of your annuity, survivor benefits, life and health insurance, Social Security taxes, relocation and movement of household effects and assistance in obtaining other employment, if appropriate. In addition to the sessions with your Retirement Counselor, you will be invited to avail yourself of selected literature on all aspects of retirement.
3. Some persons who wish to retire voluntarily prior to the scheduled date, or who wish to commence their planning as early as possible, prefer to work with their Retirement Counselor well before the time he would normally contact them. If you believe you would benefit from such an earlier start on your personal planning, you are invited to contact the Retirement Counselor responsible for your Directorate. He is assigned from your Directorate to the Retirement Affairs Division, 212 Magazine Building in Rosslyn, on telephone extension 3328.
4. Experience has amply demonstrated that careful planning facilitates the transition to retirement. I recommend, strongly, that you avail yourself of the services the Agency offers you in planning your own retirement.

H. S. Wattlea  
Director of Personnel



ADMINISTRATIVE - INTERNAL USE ONLY

13 MAR 1970

MEMORANDUM FOR :

THROUGH : Administrative Officer, MPS

SUBJECT : Purchase of Service Credit

1. This is to advise you that your application to purchase service credit under the CIA Retirement and Disability System has been processed. The amount of \$437.00 will be required to purchase credit for the period 18 June 1946 through 17 June 1947 when no deductions were withheld from your salary. Under the current provisions of the CIA Retirement System, payment of the above amount will increase your annuity by approximately 2 per cent of your high-three average salary at the time of retirement. The amount due includes interest to the present date.

2. It should be explained that under the CIA Retirement and Disability System, all periods of creditable Federal civilian service during which retirement deductions were not taken from salary must be purchased by making a deposit in order for the time to be counted in the computation of the retirement annuity. Under the Civil Service Retirement System, such periods of Federal service are always creditable in the computation of annuity, but if not purchased, the annuity is reduced by 10 per cent of the amount due. For example, if a deposit of \$1,000 is required to purchase credit for those periods of service during which no deductions were withheld from salary, and it is not paid, the basic annuity would be reduced by \$100 per year. If the deposit of \$1,000 is paid, the retiree would have to wait 10 years to recover his own deposit before profiting from the payment.

ADMINISTRATIVE - INTERNAL USE ONLY

ADMINISTRATIVE-INTERNAL USE ONLY

-2-

3. The Agency has as an aim: legislatively to secure the Civil Service option, i. e., credit for periods of non-deduction service without prior payment thereof, but with reduction of the basic annuity by 10 per cent of the amount due. Therefore, you may wish to consider deferring payment. You should be aware that the interest on the amount due will continue to accumulate at the rate of 3 per cent compounded annually if you decide to defer. For example, if it would take \$1,000 to purchase credit today, the amount due one year later would be \$1,030.

4. After consideration of the above options, if you wish to purchase credit for the period of non-deduction service noted in paragraph 1, please make your check payable to the Treasurer of the United States and forward it to the Chief, Retirement Operations Branch, 205 Magazine Building. If you prefer, you may make installment payments or arrange for bi-weekly payroll allotments of \$25.00 or multiples thereof. A receipt showing a statement of your account will be sent to you acknowledging each payment.

FOR THE DIRECTOR OF PERSONNEL



Chief, Retirement Affairs Division

Distribution:

- O - Addressee
- 1 - D/Pers
- 1 - CPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/[redacted] (6 March 1970)

Retyped: OP/RAD/JMG (13 March 1970)

ADMINISTRATIVE-INTERNAL USE ONLY

SECRET

(When Filled In)

|   |                              |   |                                    |  |  |   |                         |
|---|------------------------------|---|------------------------------------|--|--|---|-------------------------|
| <b>REQUEST FOR PERSONNEL ACTION</b>   |                              |   |                                    |  |  | DATE PREPARED<br>3 June 1968                |                         |
| 1. SERIAL NUMBER  |                              | 2. NAME (Last-First-Middle)                                 |                                    |  |  |   |                         |
| 3. NATURE OF PERSONNEL ACTION<br><b>Reassignment</b>  |                              |   |                                    | 4. EFFECTIVE DATE REQUESTED<br>MONTH DAY YEAR<br><b>06 12 68</b> |  | 5. CATEGORY OF EMPLOYMENT<br><b>Regular</b> |                         |
| 6. FUNDS  |                              | 7. FINANCIAL ANALYSIS NO. CHARGABLES<br><b>8121-2887</b>    |                                    | 8. LEGAL AUTHORITY (Completed by Office of Personnel)            |  |   |                         |
| 9. ORGANIZATIONAL DESIGNATIONS<br><b>DDP/Missions and Programs Staff Programs Group</b>   |                              |   |                                    | 10. LOCATION OF OFFICIAL STATION<br><b>Washington, D. C.</b>     |  |   |                         |
| 11. POSITION TITLE<br><b>Ops Officer (SG)</b>   |                              |   | 12. POSITION NUMBER<br><b>0008</b> |  | 13. CAREER SERVICE DESIGNATION<br><b>D</b> |   |                         |
| 14. CLASSIFICATION SCHEDULE (G.S. I.B., etc.)<br><b>GS</b>  |                              | 15. OCCUPATIONAL SERIES<br><b>0136.01</b>                   |                                    | 16. GRADE AND STEP<br><b>16 5</b>                                |  | 17. SALARY OR RATE<br><b>\$ 23,778 ✓</b>    |                         |
| 18. REMARKS   |                              |   |                                    |  |  |   |                         |
| <p>Date: 6/12/68</p> <p>Security Approval has been granted for this request.</p> <p>Dist: 1 - CSPS<br/>1 - Security<br/>1 - Payroll</p> |                              |   |                                    |  |  |   |                         |
| 19A. SIGNATURE OF REQUESTING OFFICIAL   |                              | DATE SIGNED<br><b>3 June 1968</b>                           |                                    | 19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER               |  | DATE SIGNED                                 |                         |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL  |                              |   |                                    |  |  |   |                         |
| 19. ACTION CODE<br><b>37-10</b>   | 20. EMPLOY CODE<br><b>IC</b> | 21. OFFICE CODING<br>MOVEMENT ALPHABETIC<br><b>52150MP3</b> |                                    | 22. STATUS CODE<br><b>7503</b>                                   | 23. INTEREST CODE                          | 24. EMPLOY CODE                             | 25. DATE OF BIRTH       |
| 26. SITE EMPLOY   |                              | 27. SPECIAL RESERVE   | 28. RETIREMENT DATA                | 29. SEPARATION DATA CODE   | 30. CORRECTION - CANCELLATION DATA         |   | 31. SECURITY REG. NO.   |
| 32. VET. PREFERENCE   |                              | 33. LEAVE CODE DATE   | 34. LONG LEAVE DATE                | 35. LEAVE CATEGORY   | 36. HEALTH INSURANCE                       |   | 37. SOCIAL SECURITY NO. |
| 38. PERSONNEL OFFICER'S COMMENTS  |                              | 39. LEAVE CAT CODE  | 40. FEDERAL TAX DATA               |  | 41. STATE TAX DATA                         |   |                         |
| 42. POSITION CONTROL CERTIFICATION  |                              | 43. D.P. APPROVAL   |                                    | DATE APPROVED  |  |   |                         |

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4

From O/PPB

06-12-68

H.B. Fisher

10 June 68

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING AND  
DECLASSIFICATION

SECRET

(U.S. GOVERNMENT)

| REQUEST FOR PERSONNEL ACTION   |                       |  |                                  | DATE PREPARED   |                                |                   |                   |                 |
|--|-----------------------|--|----------------------------------|---|--------------------------------|-------------------|-------------------|-----------------|
| 1. SERIAL NUMBER   |                       |  |                                  | 4 August 1966   |                                |                   |                   |                 |
| 2. NAME (Last-First-Initial)   |                       |  |                                  |   |                                |                   |                   |                 |
| 3. NATURE OF PERSONNEL ACTION  |                       |  | 4. EFFECTIVE DATE REQUESTED      |   | 5. CATEGORY OF EMPLOYMENT      |                   |                   |                 |
| Excepted Appointment <i>Green</i>  |                       |  | 7   31   66                      |   | Regular                        |                   |                   |                 |
| 6. FUNDS   |                       | 7. FINANCIAL ANALYSIS                  |                                  | 8. LEGAL AUTHORITY (Completed by Office of Personnel) |                                |                   |                   |                 |
| V TO V<br>CF TO V  |                       | V TO CF<br>X CF TO CF                  |                                  | 7114-0001   |                                |                   |                   |                 |
| 9. ORGANIZATIONAL DESIGNATIONS   |                       |  | 10. LOCATION OF OFFICIAL STATION |   |                                |                   |                   |                 |
| DCI/Office of Planning, Programming and Budgeting<br>Planning and Programming Division<br>Program Analysis Branch    |                       |  | Washington, D. C.                |   |                                |                   |                   |                 |
| 11. POSITION TITLE   |                       |  | 12. POSITION NUMBER              |   | 13. CAREER SERVICE DESIGNATION |                   |                   |                 |
| IO - Program Eval  |                       |  | 0005                             |   | D                              |                   |                   |                 |
| 14. CLASSIFICATION SCHEDULE (G.S. LR, etc.)  |                       | 15. OCCUPATIONAL SERIES                | 16. GRADE AND STEP               |   | 17. SALARY OR RATE             |                   |                   |                 |
| GS   |                       | 0132.70                                | 16 4                             |   | \$ 3 2085                      |                   |                   |                 |
| 18. REMARKS  |                       |  |                                  |   |                                |                   |                   |                 |
| <del>PRA as provided by the provisions of HR 20-17 d.(c) for a period of 600</del><br><i>year.</i><br><i>C-09-55</i> |                       |  |                                  |   |                                |                   |                   |                 |
| DATE SIGNED  |                       | DATE OF CAREER SERVICE LEAVING OFFICER |                                  | DATE SIGNED   |                                |                   |                   |                 |
| PPB  |                       | 8/5/66                                 |                                  | 8/5/66  |                                |                   |                   |                 |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |                       |  |                                  |   |                                |                   |                   |                 |
| 19. BIRTH CODE   | 20. EMPLOY CODE       | 21. OFFICE CODE                        | 22. STATION CODE                 | 23. INTEREST CODE                                     | 24. POSTING CODE               | 25. DATE OF BIRTH | 26. DATE OF GRANT | 27. DATE OF LST |
| 13   | 10                    | 02350                                  | 01113                            | 75013   | 1                              | 1/1/44            | 8/1/65            | 8/1/65          |
| 28. SEE EMPLOY   | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA                    | 31. SEPARATION DATA CODE         | 32. COLLECTION CANCELLATION DATA                      | 33. SECURITY                   | 34. SEE           | 35. SEE           | 36. SEE         |
|  |                       |  | 2                                |   | EOD DATA                       | 0000              |                   |                 |
| 37. SEE PREFERENCE   | 38. SEE COMP DATE     | 39. LONG COMP DATE                     | 40. FACTS LANGUAGE               | 41. FINAL HEALTH INSURANCE                            | 42. SOCIAL SECURITY NO         |                   |                   |                 |
| 1  | 8/1/66                | 8/1/62                                 | C                                | 1   |                                |                   |                   |                 |
| 43. PREVIOUS CIVILIAN GOVERNMENT SERVICE   | 44. SEE LST           | 45. FEDERAL PAY DATA                   | 46. PAY ADJUSTMENT CODE          | 47. TWO YEAR EXEMPTIONS                               | 48. PAY ADJUSTMENT             | 49. SEE DATE      |                   |                 |
| 1  | 3                     | C MO                                   |                                  |   |                                |                   |                   |                 |
| 49. POSITION CONTROL CERTIFICATION   |                       |  |                                  | DATE APPROVED   |                                |                   |                   |                 |
|  |                       |  |                                  | 8/5/66  |                                |                   |                   |                 |

FORM 1157 USE PREVIOUS EDITIONS

SECRET

EXCLUDE FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

1 August 1966

SIGNAL NUMBER  
060917

3. NATURE OF PERSONNEL ACTION  
RESIGNATION

4. EFFECTIVE DATE REQUESTED  
MONTH: 07, DAY: 30, YEAR: 66

5. CATEGORY OF EMPLOYMENT  
REGULAR

6. FUNDS  
V TO V, C TO V, X, U TO C

7. COST CENTER NO. CHARGEABLE  
7129-0369

8. LEGAL AUTHORITY (Completed by Office of Personnel)

9. ORGANIZATIONAL DESIGNATIONS  
DDP/DOD  
U.S. FIELD

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE  
CHIEF OF BASE GS-14

12. POSITION NUMBER  
0261

13. CAREER SERVICE DESIGNATION  
D

14. CLASSIFICATION SCHEDULE (GS, F, B, etc.)  
GS

15. OCCUPATIONAL SERIES  
0136.06

16. GRADE AND STEP  
16 4

17. SALARY OR RATE  
\$ 22,085

18. REMARKS  
Subject is reemployable.

19A. DATE SIGNED  
1 Aug 66  
DATE SIGNED  
5 Aug 66

SPACE RESERVED FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Grid for personnel data including fields for ACTION CODE, FAMILY CODE, OFFICE CODING, STATION CODE, EMPLOY CODE, DATE OF BIRTH, DATE OF ENTRY, DATE OF LEI, etc.

43. POSITION CONTROL IDENTIFICATION  
44. OFF APPROVAL  
45. STATE TAG DATA

SECRET

FD-302 (Rev. 7-16-64)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

9 July 1965

1 SERIAL NUMBER: [ ] NAME: [ ]

3 NATURE OF PERSONNEL ACTION  
**DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM**

4 EFFECTIVE DATE REQUESTED  
 MONTH: 08 DAY: 01 YEAR: 65

5 CATEGORY OF EMPLOYMENT  
**REGULAR**

6 PLACES  
 Y TO V: [ ] V TO CF: [ ]  
 CF TO V: [ ] XII CF TO CF: [ ]

7 COST CENTER NO. CHARGE-AME  
**6129-0369**

8 LEGAL AUTHORITY (Completed by Office of Personnel)  
**PL 88-613 Sect. 203**

9 ORGANIZATIONAL DESIGNATIONS  
**DDP/DOD  
 U. S. FIELD**

10 LOCATION OF OFFICIAL STATION  
 [ ]

11 POSITION TITLE  
**CHIEF OF BASE**

12 POSITION NUMBER  
**0261**

13 CAREER SERVICE DESIGNATION  
**D**

14 CLASSIFICATION SCHEDULE (GS, LB, etc.)  
**GS**

15 OCCUPATIONAL SERIES  
**0136.08**

16 GRADE AND STEP  
**16 3**

17 SALARY OR RATE  
**\$ 20,215 ✓**

18 REMARKS  
**EMPLOYEE WILL BE NOTIFIED BY DISPATCH FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND OF HIS RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE**

1cc to OP/ESD/BCB

18a SIGNATURE OF REQUESTING OFFICIAL: [ ] DATE SIGNED: 12 July 1965  
 18b SIGNATURE OF CAREER SERVICE APPROVING OFFICER: [ ] DATE SIGNED: [ ]

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |                           |                             |                                   |  |                            |                       |                            |                          |
|--|---------------------------|-----------------------------|-----------------------------------|--|----------------------------|-----------------------|----------------------------|--------------------------|
| 17 AGENCY CODE: 28                       | 18 DIVISION CODE: 10      | 21 OFFICE CODING: 43620 DOD | 22 STATION CODE: 75020            | 23 BRANCH CODE: [ ]                    | 24 ROUTES CODE: 2          | 25 DATE OF BIRTH: [ ] | 26 DATE OF DEATH: 08 30 64 | 27 DATE OF LEI: 08 30 64 |
| 28 AGE GROUP: [ ]                        | 29 SPECIAL REFERENCE: [ ] | 30 RETIREMENT DATA: [ ]     | 31 SEPARATION DATA CODE: [ ]      | 32 CORRECTION (CANCELLATION) DATA: [ ] | EOD DATA →                 |                       |                            | 33 SECURITY REC NO: [ ]  |
| 34 PREVIOUS EMPLOYMENT: [ ]              | 35 SERV COMP DATE: [ ]    | 36 LONG COMP DATE: [ ]      | 37 CAREER CATEGORY: [ ]           | 38 HEALTH/ACCIDENT INSURANCE: [ ]      | 39 SOCIAL SECURITY NO: [ ] |                       |                            |                          |
| 40 PREVIOUS GOVERNMENT SERVICE DATA: [ ] | 41 LEAVE DATA: [ ]        | 42 SPECIAL TAX DATA: [ ]    | 43 HEALTH/ACCIDENT INSURANCE: [ ] | 44 SERV TAX DATA: [ ]                  | 45 SOCIAL SECURITY NO: [ ] |                       |                            |                          |

43 POSITION CONTROL CERTIFICATION  
 [ ] DATE APPROVED: 12/14/65

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

24 OCT 1964

|   |  |   |  |  |   |
|---|--|---|--|--|---|
| 1 SERIAL NUMBER<br><b>XAF</b>                                     |  | 2 NAME (Last-First-Middle)<br>[REDACTED]                        |  | 3 CATEGORY OF EMPLOYMENT<br><b>REGULAR</b>           |   |
| 3 NATURE OF PERSONNEL ACTION<br><b>(CAREER)<br/>INCREASED AMT</b> |  | 4 EFFECTIVE DATE PERMITTED<br>MONTH DAY YEAR<br><b>10 25 64</b> |  | 5 LEGAL AUTHORITY (Completed by Office of Personnel) |   |
| 6 FUNDS<br>V TO V<br>CF TO V                                      |  | 7 COST CENTER NO (CHARGABLE)<br><b>5329-0369</b>                |  | 8 LEGAL AUTHORITY (Completed by Office of Personnel) |   |
| 9 ORGANIZATIONAL DESIGNATIONS<br><b>DEF/DCD<br/>US FIELD</b>      |  | 10 LOCATION OF OFFICIAL STATION                                 |  |  |   |
| 11 POSITION TITLE<br><b>OPS OFFICER</b>                           |  | 12 POSITION NUMBER<br><b>0261</b>                               |  | 13 CAREER SERVICE DESIGNATION<br><b>D</b>            |   |
| 14 CLASSIFICATION SCHEDULE (GS, FE, etc.)<br><b>GS</b>            |  | 15 OCCUPATIONAL SERIES<br><b>0136.01</b>                        |  | 17 SALARY OR RATE<br><b>\$ 20245</b>                 |   |
| 16 REMARKS<br><b>C-09/55</b>                                      |  |   |  |  |   |
| 18A SIGNATURE OF REQUESTING OFFICIAL<br>[REDACTED]                |  | DATE SIGNED<br><b>24 Oct 64</b>                                 |  | DATE SIGNED<br><b>4 Nov 64</b>                       |   |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL          |  |   |  |  |   |
| 19 ACTION CODE<br><b>13</b>                                       | 20 EMPLOY CODE<br><b>10</b>                          | 21. SHIRTS CODING<br>NUMERIC<br><b>43620</b>                    | 22. DESIGNATION<br>ALPHABETIC<br><b>DD</b> | 23. INTEREST CODE<br><b>000</b>                      | 24. DATE OF BIRTH<br>MO. DA. YR.<br><b>08 30 64</b> |
| 25. DATE OF GRADE<br>MO. DA. YR.<br><b>08 30 64</b>               | 26. DATE OF HI<br>MO. DA. YR.<br><b>08 30 64</b>     | 27. SECURITY REQ NO<br><b>0900 M</b>                            | 28. SECURITY REQ NO                        |  |   |
| 29. VET PREFERENCE<br>CODE<br><b>1</b>                            | 30. SERV CORP DATE<br>MO. DA. YR.<br><b>08 06 42</b> | 31. LEAVE CAT<br>CODE<br><b>8</b>                               | 32. CAREER CATEGORY<br>CODE<br><b>1</b>    | 33. HEALTH/PLACED INSURANCE<br>CODE<br><b>1</b>      | 34. SOCIAL SECURITY NO                              |
| 35. PREVIOUS GOVERNMENT SERVICE DATA<br>CODE<br><b>1</b>          |  | 36. LEAVE CAT<br>CODE<br><b>8</b>                               | 37. PAYRANGE<br>CODE<br><b>0</b>           | 38. PAYRANGE<br>CODE<br><b>0</b>                     | 39. STATE EMP DATA<br>CODE<br><b>1</b>              |
| 40. POSITION CONTROL CERTIFICATION                                |  | 41. O.P. APPROVAL<br><b>1/9/64</b><br><b>(OP)</b>               |  | 42. DATE APPROVED<br><b>27 Oct 64</b>                |   |

336

CONFIDENTIAL

REPORT OF CLEARANCES

TO: DIRECTOR OF PERSONNEL  
ATTENTION:  Mobilization and Military Personnel Division  
 Chief, Benefits and Counseling Branch, BSD  
 Chief, Staff Agent Branch, CPD

SERIAL NO. [ ] NAME OF EMPLOYEE (Last-First-Middle) [ ] GRADE GS-16 POSITION TITLE Ops Officer

OTHER TRUE NAMES USED WHILE IN AGENCY [ ] COST CENTER NUMBER CHARGEABLE 5122-6262 FUNDS  V  CF

REASON FOR CLEARANCE  SEPARATION  EXTENDED LEAVE (Note reason)  OTHER (Specify): [ ] LAST WORKING DAY (Date) 23 October 1964

EFFECTIVE DATE OF SEPARATION 24 October 1964

FORM 1192, REQUEST FOR PERSONNEL ACTION, WAS FORWARDED TO THE OFFICE OF PERSONNEL ON 29 Oct. 64  
 FORM 1192, REQUEST FOR PERSONNEL ACTION, IS ATTACHED TO THIS FORM.

THIS IS TO CERTIFY THAT THE COMPONENTS LISTED BELOW HAVE FURNISHED POSITIVE VERIFICATION BY TELEPHONE OR CERTIFICATIONS TO THE UNDERSIGNED THAT THE SEPARATING EMPLOYEE:  
• HAS RETURNED OR ACCOUNTED FOR ANY GOVERNMENT PROPERTY ISSUED TO HIM;  
• SETTLED OR SATISFACTORILY ARRANGED FOR THE SETTLEMENT OF ANY INDEBTEDNESS TO THE AGENCY;  
• RETURNED SPECIAL I.D. CARDS OR CREDENTIALS ISSUED TO HIM;  
• RECEIVED AND UNDERSTOOD INSTRUCTIONS CONCERNING SPECIAL CLEARANCES, COVER INFORMATION, AND SECURITY BRIEFINGS;  
• SATISFACTORILY RESOLVED OR CLOSED OUT ANY SPECIAL RESPONSIBILITIES ASSIGNED TO HIM.

| OFFICE  | DATE CLEARED | CLEARED BY - NAME |
|---|--------------|-------------------|
| <input checked="" type="checkbox"/> OFFICE OF LOGISTICS           | 10 Nov 64    | [Redacted]        |
| <input type="checkbox"/> OFFICE OF SECURITY                       | 19 Nov 64    |                   |
| <input checked="" type="checkbox"/> DOCUMENT CONTROLS (Incl. RID) | 10 Nov 64    |                   |
| <input checked="" type="checkbox"/> SPECIAL CLEARANCES            | 10 Nov 64    |                   |
| <input type="checkbox"/> CENTRAL COVER STAFF 4408                 | 18 Nov 64    |                   |
| <input checked="" type="checkbox"/> MEDICAL STAFF                 | 6 Nov 64     |                   |
| <input checked="" type="checkbox"/> COMMO SECURITY                | 10 Nov 64    |                   |

TITLE OF OPERATING COMPONENT OFFICIAL: DC Personnel - Training  
DATE SIGNED: 16 Nov 64

REMARKS



SECRET

(When Filled In)

|  |  |  |   |  |                                      |
|--|--|--|---|--|--------------------------------------|
| REQUEST FOR PERSONNEL ACTION   |  |  |   |  | DATE PREPARED<br>29 OCTOBER 1964     |
| 1. SERIAL NUMBER<br>VRF  |  | 2. NAME (Last-First-Middle)                                    |   |  | ✓                                    |
| 3. NATURE OF PERSONNEL ACTION<br>RESIGNATION   |  |  | 4. EFFECTIVE DATE REQUESTED<br>MONTH DAY YEAR<br>10 24 64 |  | 5. CATEGORY OF EMPLOYMENT<br>REGULAR |
| 6. FUNDS<br>V TO V<br>CF TO V  |  | V TO CF<br>X<br>CF TO CF                                       |   | 7. COST CENTER NO. CHARGE<br>AME<br>5129-0269                |                                      |
| 9. ORGANIZATIONAL DESIGNATIONS<br>DEP/DOD<br>US FIELD  |  |  | 10. LOCATION OF OFFICIAL STATION                          |  |                                      |
| 11. POSITION TITLE<br>OPS OFFICER  |  | 12. POSITION NUMBER<br>0201                                    |   | 13. CAREER SERVICE DESIGNATION<br>D                          |                                      |
| 14. CLASSIFICATION SCHEDULE (GS, FA, etc.)<br>GS   |  | 15. OCCUPATIONAL SERIES<br>0106.01                             |   | 16. GRADE AND STEP<br>16 3                                   |                                      |
|  |  |  |   | 17. SALARY OR RATE<br>\$ 20245 ✓                             |                                      |
| 18. REMARKS  |  |  |   |  |                                      |
| 19. ACTION CODE<br>45  |  | 20. EMPLOY CODE<br>10  |   | DATE SIGNED<br>29 OCT 64                                     |                                      |
| 21. OFFICE CODING<br>NUMERIC ALPHABETIC  |  | 22. STATION CODE   |   | 18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER           |                                      |
| 23. HEE EXPIRES<br>MO. DA. YR.   |  | 24. INTEGRAL CODE  |   | DATE SIGNED  |                                      |
| 25. SPECIAL REFERENCE<br>1-CSE<br>2-FICA<br>3-OSSE   |  | 26. RETIREMENT DATA<br>CODE<br>150,00%                         |   | 27. DATE OF BIRTH<br>MO. DA. YR.                             |                                      |
| 28. VET. PREFERENCE<br>CODE<br>0-NOSE<br>1-5 YR.<br>2-10 YR.   |  | 29. SEPARATION DATA CODE<br>TYPE                               |   | 29. DATE OF GRADE<br>MO. DA. YR.                             |                                      |
| 30. SERV. COMP. DATE<br>MO. DA. YR.  |  | 31. LONG. COMP. DATE<br>MO. DA. YR.                            |   | 32. CORRECTION/CANCELLATION DATA<br>MO. DA. YR.              |                                      |
| 33. CAREER CATEGORY<br>CODE<br>1-REG<br>2-TEMP   |  | 34. FEELI/HEALTH INSURANCE<br>CODE<br>0-WAIVER<br>1-YES        |   | 33. SECURITY REQ. NO.  |                                      |
| 35. SOCIAL SECURITY NO.  |  | 36. FEDERAL TAX DATA<br>FORM EXECUTED<br>CODE<br>1-YES<br>2-NO |   | 37. STATE TAX DATA<br>FORM EXECUTED<br>CODE<br>1-YES<br>2-NO |                                      |
| 38. PREVIOUS GOVERNMENT SERVICE DATA<br>CODE<br>0-NO PREVIOUS SERVICE<br>1-NO BREAK IN SERVICE<br>2-BREAK IN SERVICE (LESS THAN 3 YEARS)<br>3-BREAK IN SERVICE (MORE THAN 3 YEARS) |  | 39. LEAVE BAL.<br>CODE   |   | 40. SOCIAL SECURITY NO.                                      |                                      |
| 41. POSITION CONTROL CERTIFICATION   |  | 42. FEDERAL TAX DATA<br>FORM EXECUTED<br>CODE<br>1-YES<br>2-NO |   | 43. STATE TAX DATA<br>FORM EXECUTED<br>CODE<br>1-YES<br>2-NO |                                      |
| 44. OP APPROVAL<br>11/164<br>405   |  | 45. DATE APPROVED  |   | 46. SIGNATURE OF APPROVING OFFICER<br>Conradto affilia       |                                      |

Das

MAIL ROOM ON

### NOTIFICATION OF PERSONNEL ACTION

**OSF**

|                  |                             |
|------------------|-----------------------------|
| 1. SERIAL NUMBER | 2. NAME (LAST-FIRST-MIDDLE) |
|                  |                             |

|   |                                    |                           |
|---|------------------------------------|---------------------------|
| 3. NATURE OF PERSONNEL ACTION<br><b>RESIGNATION</b> | 4. EFFECTIVE DATE                  | 5. CATEGORY OF EMPLOYMENT |
|   | NO. MO. DA. YR.<br><b>10 24 64</b> | <b>REGULAR</b>            |

|          |         |          |  |                                 |
|----------|---------|----------|--|---------------------------------|
| 6. FUNDS | V TO V  | V TO CF  | 7. COST CENTER NO. CHARGEABLE<br><b>5129 0369 0000</b> | 8. CSC OR OTHER LEGAL AUTHORITY |
|          | CF TO V | CF TO CF |  |                                 |

|                                |                                  |
|--------------------------------|----------------------------------|
| 9. ORGANIZATIONAL DESIGNATIONS | 10. LOCATION OF OFFICIAL STATION |
|                                |                                  |

|  |                                    |                                     |
|--|------------------------------------|-------------------------------------|
| 11. POSITION TITLE<br><b>CPS OFFICER</b> | 12. POSITION NUMBER<br><b>0281</b> | 13. SERVICE DESIGNATION<br><b>D</b> |
|--|------------------------------------|-------------------------------------|

|   |   |                                   |                                    |
|---|---|-----------------------------------|------------------------------------|
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)<br><b>GS</b> | 15. OCCUPATIONAL SERIES<br><b>0136.01</b> | 16. GRADE AND STEP<br><b>16 3</b> | 17. SALARY OR RATE<br><b>20245</b> |
|---|---|-----------------------------------|------------------------------------|

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

30 September 1964

|   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
|---|-----------------------|-----------------------------|-------------------------|----------------------------------|----------------------------------|--------------------------------|--------------------------------|---|-----------------|
| 1. SERIAL NUMBER  |                       | 2. NAME (Last-First-Middle) |                         | 3. NATURE OF PERSONNEL ACTION    |                                  | 4. EFFECTIVE DATE REQUESTED    |                                | 5. CATEGORY OF EMPLOYMENT                             |                 |
|   |                       |                             |                         | REASSIGNMENT                     |                                  | MONTH DAY YEAR<br>10 16 64     |                                | REGULAR   |                 |
| 6. FUNDS  |                       | V TO V                      |                         | V TO CP                          |                                  | 7. COST CENTER NO. CHARGEABLE  |                                | 8. LEGAL AUTHORITY (Completed by Office of Personnel) |                 |
| D-26  |                       | CF TO V                     |                         | X CF TO CP                       |                                  | 5129-0369                      |                                |   |                 |
| 9. ORGANIZATIONAL DESIGNATIONS  |                       |                             |                         | 10. LOCATION OF OFFICIAL STATION |                                  |                                |                                |   |                 |
| DDP/DOD US Field  |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| 11. POSITION TITLE  |                       |                             |                         | 12. POSITION NUMBER              |                                  | 13. CAREER SERVICE DESIGNATION |                                |   |                 |
| OPS OFFICER   |                       |                             |                         | 00 0261                          |                                  | D                              |                                |   |                 |
| 14. CLASSIFICATION SCHEDULE (GS, EB, etc.)  |                       |                             | 15. OCCUPATIONAL SERIES |                                  | 16. GRADE AND STEP               |                                | 17. SALARY OR RATE             |   |                 |
| GS-07   |                       |                             | 0136.01                 |                                  | 16-35                            |                                | 3 438,240 2.0, 24.5            |   |                 |
| 18. REMARKS   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| * Phonorecords ordered [ ] for FE   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| POSITION TITLE CHARGE   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| Security Approval Granted by [ ] on 10/6/64   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| [ ]   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| DATE SIGNED   |                       |                             |                         | 18B. SIO                         |                                  | DATE SIGNED                    |                                |   |                 |
| 30 Sept 64  |                       |                             |                         |                                  |                                  | 13 Oct 64                      |                                |   |                 |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL  |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| 19. ACTION CODE   | 20. EMPLOY CODE       | 21. OFFICE CODING           |                         | 22. STATION CODE                 | 23. INTEGRAL CODE                | 24. HOURS CODE                 | 25. DATE OF BIRTH              | 26. DATE OF GRADE                                     | 27. DATE OF LEI |
| 37  | 10                    | 113030                      |                         | 0000                             |                                  | 2                              |                                |   |                 |
| 28. HIRING DATE   | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA         |                         | 31. SEPARATION DATA CODE         | 32. CORRECTION/CANCELLATION DATA |                                | 33. SECURITY SIO NO.           |   | 34. SEA         |
|   |                       |                             |                         |                                  |                                  |                                | EOD DATA                       |   |                 |
| 35. VET. PREFERENCE   | 36. LEAF. COMP. DATE  | 37. LONG. COMP. DATE        |                         | 38. CAREER CATEGORY              |                                  | 39. FATAL HEALTH INSURANCE     |                                | 40. SOCIAL SECURITY NO.                               |                 |
|   |                       |                             |                         |                                  |                                  |                                |                                |   |                 |
| 41. PREVIOUS GOVERNMENT SERVICE DATA  |                       |                             |                         | 42. LEAF. LAT. CODE              | 43. FEDERAL TAX DATA             |                                | 44. STATE TAX DATA             |   |                 |
| 0-NO PREVIOUS SERVICE<br>1-NO LEAF IN SERVICE<br>2-LEAF IN SERVICE (LESS THAN 3 YEARS)<br>3-LEAF IN SERVICE (MORE THAN 3 YEARS) |                       |                             |                         |                                  | FORM EXECUTED<br>1-FIS<br>2-NO   |                                | FORM PREVIOUS<br>1-FIS<br>2-NO |   |                 |
| 45. POSITION CONTROL CERTIFICATION  |                       |                             |                         | 46. O/P APPROVAL                 |                                  | DATE APPROVED                  |                                |   |                 |
| [ ]   |                       |                             |                         | [ ]                              |                                  | 14 Oct 64                      |                                |   |                 |

D-26

F-9

FORM 1152

USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

10 MAY 1968

SECRET

MEMORANDUM FOR: Secretary, CS Career Service Board

SUBJECT: Recommendation for Promotion to GS-16,

[Redacted]

1. It is recommended that [Redacted] be promoted to GS-16. He has been in grade since December 1957.

2.

[Redacted]

3. For these reasons it is recommended that [Redacted] be promoted to GS-16.

*W. E. Colby*  
William E. Colby  
Chief, Far East Division

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

SECRET

SECRET  
EYES ONLY

19 OCT 1962

**MEMORANDUM FOR: Secretary, CS Career Service Board**

**SUBJECT: Recommendation for Promotion to GS-16 --**

[Redacted]

[Large Redacted Area]

2. On the basis of his proven ability and past performance as well as his seniority I believe [Redacted] to be fully qualified for promotion to GS-16.

[Redacted Signature]

Desmond Fitzgerald  
Chief, Far East Division

SECRET  
EYES ONLY

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

4 August 1964

|                  |                                 |
|------------------|---------------------------------|
| 1. SERIAL NUMBER | 2. NAME (Last - First - Middle) |
|                  |                                 |

|   |  |   |
|---|--|---|
| 3. NATURE OF PERSONNEL ACTION<br><b>PROMOTION</b> | 4. EFFECTIVE DATE REQUESTED<br>MONTH: 8, DAY: 30, YEAR: 64 | 5. CATEGORY OF EMPLOYMENT<br><b>REGULAR</b>           |
| 6. FUNDS<br>V TO V, CP TO V, V TO CP, CP TO CP    | 7. COST CENTER NO. CHARGEABLE<br><b>5137-1566</b>          | 8. LEGAL AUTHORITY (Completed by Office of Personnel) |

|   |                                  |
|---|----------------------------------|
| 9. ORGANIZATIONAL DESIGNATION<br><b>DDP/FE</b><br>Office of the Chief | 10. LOCATION OF OFFICIAL STATION |
|   |                                  |

|   |                                    |  |
|---|------------------------------------|--|
| 11. POSITION TITLE<br><i>of Unit 1st Sec</i><br><b>Ops Officer (DCOS)</b> | 12. POSITION NUMBER<br><b>3003</b> | 13. CAREER SERVICE DESIGNATION<br><b>D</b> |
|---|------------------------------------|--|

|   |   |                                      |  |
|---|---|--------------------------------------|--|
| 14. CLASSIFICATION SCHEDULE (GS, F, H, etc.)<br><b>GS</b> | 15. OCCUPATIONAL SERIES<br><b>0136.01</b> | 16. GRADE AND STEP<br><b>GS 16-3</b> | 17. SALARY PER YEAR<br><b>\$20,245</b> |
|---|---|--------------------------------------|--|

18. REMARKS

|                                       |             |  |             |
|---------------------------------------|-------------|--|-------------|
| 18A. SIGNATURE OF REQUESTING OFFICIAL | DATE SIGNED | 18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER | DATE SIGNED |
|                                       |             |  | 8/2/64      |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|   |                                    |  |   |  |  |  |                                 |                |
|---|------------------------------------|--|---|--|--|--|---------------------------------|----------------|
| 19. ACTION CODE   | 20. EMPLOY CODE                    | 21. OFFICE CODING<br>NUMERIC, ALPHABETIC     | 22. STATION CODE  | 23. INTEGRATE CODE                                   | 24. HQS/IS CODE<br><b>3</b>                          | 25. DATE OF BIRTH<br>MO, DA, YR                  | 26. DATE OF GRADE<br>MO, DA, YR | 27. DATE OF HI |
| 28. WFO EXPIRES<br>MO, DA, YR   | 29. SPECIAL REFERENCE              | 30. RETIREMENT DATA<br>1-ENC, 3-FICA, 5-NONE | 31. SEPARATION DATA CODE                                | 32. CORRECTION/CANCELLATION DATA<br>TYPE, MO, DA, YR | 33. SECURITY REG. NO.                                | 34. SER  | EOD DATA                        |                |
| 35. VET. PREFERENCE<br>1-5 PT, 2-10 PT  | 36. SERV. COMP. DATE<br>MO, DA, YR | 37. LONG. COMP. DATE<br>MO, DA, YR           | 38. CAREER CATEGORY<br>1-REG, 2-TEMP                    | 39. FEGLI/HEALTH INSURANCE<br>CODE, 0-WAIVER, 1-TS   | 40. SOCIAL SECURITY NO.                              |  |                                 |                |
| 41. PREVIOUS GOVERNMENT SERVICE DATA<br>1-NO PREVIOUS SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS) |                                    | 42. LEAVE CAT. CODE                          | 43. FEDERAL TAX DATA<br>FORM REQUESTED CODE, 1-TS, 2-NO |  | 44. STATE TAX DATA<br>NO. TAX EXEMPTIONS, 1-TS, 2-NO | 45. STATE TAX DATA<br>CODE, EMP. TAX, STATE CODE |                                 |                |
| 46. POSITION CONTROL CERTIFICATION  |                                    |  |   | 47. DATE APPROVED<br><b>20 AUG 1964</b>              |  |  |                                 |                |

9 F.

1152 USE PREVIOUS EDITION

SECRET

FORM 100-1 (REV. 1-64)

SECRET

(When Filled In)

| REQUEST FOR PERSONNEL ACTION  |   |                                |  |  |                                  | DATE PREPARED           |                       |                   |                    |
|---|---|--------------------------------|--|--|----------------------------------|-------------------------|-----------------------|-------------------|--------------------|
| 1. SERIAL NUMBER  |   | 2. NAME (Last-First-Middle)    |  |  |                                  | 3. August 1964          |                       |                   |                    |
| 3. NATURE OF PERSONNEL ACTION   |   |                                | 4. EFFECTIVE DATE REQUESTED                        |  | 5. CATEGORY OF EMPLOYMENT        |                         |                       |                   |                    |
| PROMOTION   |   |                                | MONTH DAY YEAR<br>8 30 64                          |  | REGULAR                          |                         |                       |                   |                    |
| 6. FUNDS  |   | 7. COST CENTER NO. CHARGE-ABLE |  | 8. LEGAL AUTHORITY (Complied by Office of Personnel) |                                  |                         |                       |                   |                    |
| <table border="1"> <tr> <td>V TO V</td> <td>V TO C</td> </tr> <tr> <td>C TO V</td> <td>C TO C</td> </tr> </table> |   | V TO V                         | V TO C   | C TO V   | C TO C                           | 5137-1566               |                       |                   |                    |
| V TO V  | V TO C  |                                |  |  |                                  |                         |                       |                   |                    |
| C TO V  | C TO C  |                                |  |  |                                  |                         |                       |                   |                    |
| 9. ORGANIZATIONAL DESIGNATIONS  |   |                                | 10. LOCATION OF OFFICIAL STATION                   |  |                                  |                         |                       |                   |                    |
| DDP/FE<br>Office of the Chief   |   |                                |  |  |                                  |                         |                       |                   |                    |
| 11. POSITION TITLE  |   |                                | 12. POSITION NUMBER                                | 13. CAREER SERVICE DESIGNATION                       |                                  |                         |                       |                   |                    |
| Ops Officer (DDOS)  |   |                                | 3003   | D  |                                  |                         |                       |                   |                    |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)  |   | 15. OCCUPATIONAL SERIES        | 16. GRADE AND STEP                                 | 17. SALARY OR RATE                                   |                                  |                         |                       |                   |                    |
| GS  |   | 0136.01                        | 16-3   | SD 0,245   |                                  |                         |                       |                   |                    |
| 18. REMARKS   |   |                                |  |  |                                  |                         |                       |                   |                    |
|   |   |                                |  |  |                                  |                         |                       |                   |                    |
| 18A. SIGNATURE OF REQUESTING OFFICER  |   | DATE SIGNED                    | 18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER |  | DATE SIGNED                      |                         |                       |                   |                    |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL  |   |                                |  |  |                                  |                         |                       |                   |                    |
| 19. ACTION CODE   | 20. EMPLOY CODE   | 21. OFFICE CODES               |  | 22. STATION CODE                                     | 23. INITIALS CODE                | 24. HOURS CODE          | 25. DATE OF BIRTH     | 26. DATE OF GRADE | 27. DATE OF LES    |
|   |   | NUMERIC                        | ALPHABETIC   |  |                                  |                         | MO. DA. YR.           | MO. DA. YR.       | MO. DA. YR.        |
| 28. WTE LAPSES  | 29. SPECIAL ASSIGNMENT  | 30. REEMPLOYMENT DATA          |  | 31. SEPARATION DATA CODE                             | 32. CORRECTION-CANCELLATION DATA |                         | 33. SECURITY REG. NO. |                   | 34. SEA            |
| MO. DA. YR.   |   | 1-REG<br>2-REPL<br>3-NONE      | CODE   |  | TYPE                             | MO. DA. YR.             | EOD DATA              |                   |                    |
| 35. VET PREFERENCE  | 36. SEPA. COMP. DATE  | 37. LONG COMP. DATE            | 38. CAREER CATEGORY                                | 39. FEDERAL HEALTH INSURANCE                         |                                  | 40. SOCIAL SECURITY NO. |                       |                   |                    |
| CODE  | MO. DA. YR.   | MO. DA. YR.                    | CAR. SERV. PROF. TEMP.                             | CODE   | CODE                             | 8-WHITE<br>1-115        | HEALTH INS. CODE      |                   |                    |
| 41. PREVIOUS GOVERNMENT SERVICE DATA  |   | 42. LEAVE CAT. CODE            | 43. FEDERAL TAX DATA                               | 44. STATE TAX DATA                                   |                                  |                         |                       |                   |                    |
| CODE  | 0-NO PREVIOUS SERVICE<br>1-30 YEARS IN SERVICE<br>2-BETW 30-39 YEARS IN SERVICE<br>3-40 YEARS IN SERVICE (EXCL. FROM 3 YEARS) |                                | NO. TAX EXEMPTIONS                                 | FORM EXEMPTED  | CODE                             | NO. TAX EXEMPTIONS      | FORM EXEMPTED         | CODE              | NO. TAX EXEMPTIONS |
| 45. POSITION CONTROL CERTIFICATION  |   | 46. O.P. APPROVAL              |  | DATE APPROVED  |                                  |                         |                       |                   |                    |
|   |   | /s/ Henry W. T. [Signature]    |  | 28 AUG 1964  |                                  |                         |                       |                   |                    |

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

21 SEPTEMBER 1964

|                    |  |                               |  |   |  |  |  |   |  |
|--------------------|--|-------------------------------|--|---|--|--|--|---|--|
| 1. SERIAL NUMBER   |  | 2. NAME (Last-First-Middle)   |  | 3. NATURE OF PERSONNEL ACTION   |  | 4. EFFECTIVE DATE REQUESTED                    |  | 5. CATEGORY OF EMPLOYMENT                         |  |
|                    |  |                               |  | CONVERSION FROM <input type="checkbox"/> Status <input checked="" type="checkbox"/>   |  | MONTH COB YEAR<br>08 25 64                     |  | REGULAR   |  |
| 6. FUNDS           |  | 7. COST CENTER NO. CHARGEABLE |  | 8. LEGAL AUTHORITY (Completed by Office of Personnel)   |  | 9. ORGANIZATIONAL DESIGNATIONS                 |  | 10. LOCATION OF OFFICIAL STATION                  |  |
| V TO V<br>CF TO V  |  | V TO CF<br>CF TO CF           |  |   |  | DDP/FE<br>FORRIGN FIELD<br>OFFICE OF THE CHIEF |  |   |  |
| 11. POSITION TITLE |  | 12. POSITION NUMBER           |  | 13. CAREER SERVICE DESIGNATION  |  | 14. CLASSIFICATION SCHEDULE (GS, FS, etc.)     |  | 15. OCCUPATIONAL SERIES                           |  |
| OPS OFFICER DCOS   |  | 3003                          |  | D   |  | GS   |  | 0136.01   |  |
| 16. GRADE AND STEP |  | 17. SALARY GR. RATE           |  | 18. REMARKS   |  | 19. SIGNATURE OF REQUESTING OFFICIAL           |  | 20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER |  |
| 15 5               |  | 5. 28749                      |  | SUBJECT CONVERTED FROM <input type="checkbox"/> COB 25 AUGUST 1964.<br>* Succeeded Action Promotion to GS16 3 120295 effective 08/30/64.<br>1 COPY PAYROLL. |  | C/PP/PPRS                                      |  | 9/22/64   |  |

9  
F

FOR FURTHER INFO CALL X5271

|                                       |             |  |             |
|---------------------------------------|-------------|--|-------------|
| 19A. SIGNATURE OF REQUESTING OFFICIAL | DATE SIGNED | 19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER | DATE SIGNED |
|                                       | 9/21/64     |  | 9/22/64     |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|                                      |                       |                     |                          |                           |                        |                   |                   |                 |
|--------------------------------------|-----------------------|---------------------|--------------------------|---------------------------|------------------------|-------------------|-------------------|-----------------|
| 19. ACTION CODE                      | 20. EMPLOY. CODE      | 21. OFFICE CODING   | 22. STATION CODE         | 23. INTERPRET. CODE       | 24. HOURS CODE         | 25. DATE OF BIRTH | 26. DATE OF GRADE | 27. DATE OF LST |
| 26                                   | 10                    | 15370 FE            | 3859                     |                           | 3                      |                   |                   |                 |
| 28. NFE EXPIRES                      | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA | 31. SEPARATION DATA CODE | 32. CANCELLATION DATA     | 33. SECURITY REG NO    | 34. SEX           | EOD DATA          |                 |
|                                      |                       |                     |                          |                           |                        |                   |                   |                 |
| 35. VET. PREFERENCE                  | 36. SERV. COMP. DATE  | 37. ICNG COMP. DATE | 38. CAREER CATEGORY      | 39. REG. HEALTH INSURANCE | 40. SOCIAL SECURITY NO |                   |                   |                 |
|                                      |                       |                     |                          |                           |                        |                   |                   |                 |
| 41. PREVIOUS GOVERNMENT SERVICE DATA |                       |                     | 42. LEAVE CAT. CODE      | 43. FEDERAL TAX DATA      | 44. STATE TAX DATA     |                   |                   |                 |
|                                      |                       |                     |                          |                           |                        |                   |                   |                 |
| 45. POSITION CONTROL CERTIFICATION   |                       |                     | 46. PERSONAL             |                           | DATE APPROVED          |                   |                   |                 |
|                                      |                       |                     |                          |                           | 9/22/64                |                   |                   |                 |

FORM 6-63 1152

USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION



SECRET

DDP 1-46.74

30 August 1961

MEMORANDUM FOR: Deputy Director (Plans)

SUBJECT :

[Redacted]

Panel "A" recommends your approval of request of second tour for

[Redacted]

[Redacted]

Clandestine Services  
Career Service Panel  
(Section A)

APPROVED:

*Richard M. Bissell, Jr.*  
RICHARD M. BISSELL, JR.  
Deputy Director  
(Plans)

1 SEP 1961

Date

SECRET

**SECRET**  
(When Filled In)

|               |  |                             |  |                                 |  |                  |  |                    |    |                        |  |             |  |                        |  |
|---------------|--|-----------------------------|--|---------------------------------|--|------------------|--|--------------------|----|------------------------|--|-------------|--|------------------------|--|
| V to V        |  | V to UV                     |  | REQUEST FOR PERSONNEL ACTION    |  |                  |  | DATE PREPARED      |    |                        |  |             |  |                        |  |
| UV to V       |  | UV to UV                    |  |                                 |  |                  |  | Mo                 | Da | Yr                     |  |             |  |                        |  |
| 1. Serial No. |  | 2. Name (Last-First-Middle) |  |                                 |  | 3. Date Of Birth |  | 4. Vet. Pref.      |    | 5. Sex                 |  | 6. CS - EOD |  |                        |  |
|               |  |                             |  |                                 |  | Mo Da Yr         |  | None-0 Code        |    |                        |  | Mo Da Yr    |  |                        |  |
| 7. SCD        |  | 8. CSC Reamt.               |  | 9. CSC Or Other Legal Authority |  |                  |  | 10. Apmt. Affidav. |    | 11. FEGLI              |  | 12. LCD     |  | 13. Cert. LCC          |  |
| Mo Da Yr      |  | Yes - 1 Code<br>No - 2      |  |                                 |  |                  |  | Mo Da Yr           |    | Yes - 1 Code<br>No - 2 |  | Mo Da Yr    |  | Yes - 1 Code<br>No - 2 |  |

**CURRENT ASSIGNMENT**

|  |  |                          |  |        |  |                                  |  |             |  |                          |  |
|--|--|--------------------------|--|--------|--|----------------------------------|--|-------------|--|--------------------------|--|
| 14. Organizational Designations              |  |                          |  | Code   |  | 15. Location Of Official Station |  |             |  | Station Code             |  |
| DDP/FE                                       |  |                          |  |        |  |                                  |  |             |  |                          |  |
| Deputy for Operations<br>Office of the Chief |  |                          |  |        |  |                                  |  |             |  |                          |  |
| 16. Dept. - Field                            |  | 17. Position Title       |  |        |  | 18. Position No.                 |  | 19. Serv.   |  | 20. Occup. Series        |  |
| Dept. - Usfld. - Prsn.                       |  | Code                     |  |        |  | 3936                             |  | OS          |  | 0136.01                  |  |
| 21. Grade & Step                             |  | 22. Salary Or Rate       |  | 23. SD |  | 24. Date Of Grade                |  | 25. PSI Due |  | 26. Appropriation Number |  |
| 03<br>15 A 2                                 |  | \$ 11660<br>1252701 2070 |  | DI     |  | 12/15/59                         |  | 12/11/60    |  | 0137 7351 3000           |  |

**ACTION**

|                      |  |      |  |               |  |                      |  |      |  |                     |  |
|----------------------|--|------|--|---------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date |  | 29. Type Of Employee |  | Code |  | 30. Separation Data |  |
| Reassignment         |  | 376  |  | 09/06/59      |  | Regular              |  | 01   |  |                     |  |

**PROPOSED ASSIGNMENT**

|                                 |  |                    |  |                     |  |                                  |  |             |  |                          |  |
|---------------------------------|--|--------------------|--|---------------------|--|----------------------------------|--|-------------|--|--------------------------|--|
| 31. Organizational Designations |  |                    |  | Code                |  | 32. Location Of Official Station |  |             |  | Station Code             |  |
| DDP/FE                          |  |                    |  | = 171               |  |                                  |  |             |  | 37587                    |  |
| Office of the Chief             |  |                    |  |                     |  |                                  |  |             |  |                          |  |
| 33. Dept. - Field               |  | 34. Position Title |  |                     |  | 35. Position No.                 |  | 36. Serv.   |  | 37. Occup. Series        |  |
| Dept. - Usfld. - Prsn.          |  | Code               |  | Ops Officer (D COS) |  | 1215                             |  |             |  |                          |  |
| 38. Grade & Step                |  | 39. Salary Or Rate |  | 40. SD              |  | 41. Date Of Grade                |  | 42. PSI Due |  | 43. Appropriation Number |  |
|                                 |  | \$                 |  |                     |  | 12/15/59                         |  | 12/11/60    |  |                          |  |

**SOURCE OF REQUEST**

|                |  |  |  |               |  |
|----------------|--|--|--|---------------|--|
| A. [Signature] |  | C. Request Approved By (Signature and Title) |  | Date Approved |  |
| B. [Signature] |  | Desmond Fitzgerald, CFE                      |  |               |  |

**CLEARANCES**

|                   |  |                |  |          |  |                |  |             |  |      |  |
|-------------------|--|----------------|--|----------|--|----------------|--|-------------|--|------|--|
| Clearance         |  | Signature      |  | Date     |  | Clearance      |  | Signature   |  | Date |  |
| A. Career Board   |  | RC [Signature] |  | 10/20/59 |  | D. Placement   |  |             |  |      |  |
| B. Pos. Control   |  | [Signature]    |  | 8/59     |  | E. Release     |  |             |  |      |  |
| C. Classification |  |                |  |          |  | F. Approved By |  | [Signature] |  |      |  |

Remarks

Subject will replace [Redacted] Who is returning to Hqa. PCS

Continued on reverse side

*1/27/59*

SECRET

DD/P 4: 6610

MEMORANDUM FOR: Deputy Director (Plans)

17 AUG 1959

SUBJECT: [REDACTED]

1. [REDACTED]

2. [REDACTED] has been an employee of the Agency since 28 September 1952 and is currently assigned as an Intelligence Officer, GS-15. A biographic data sheet, including information regarding his Agency experience and training, is attached.

[REDACTED]  
*for*  
Donmond FitzGerald  
Chief, Far East Division

The recommendation in paragraph 1 is approved:

[REDACTED]  
Deputy Director (Plans)

25 AUG 1959

(Date)

SECRET

SECRET

BIOGRAPHIC INFORMATION

NAME : [REDACTED]

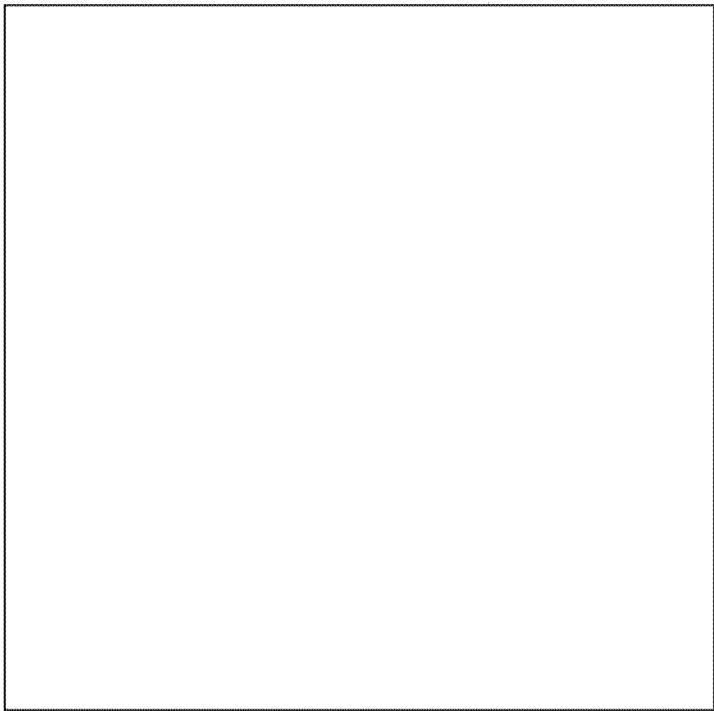
GRADE : GS-15

SERVICE DESIGNATION : DI

DATE AND PLACE OF BIRTH : [REDACTED]

MARITAL STATUS : Married; six children

EDUCATION AND CAREER OUTSIDE OF AGENCY :



LANGUAGE PROFICIENCY :

CIA EXPERIENCE :

CIA TRAINING :

Form 100-10  
 Issued by the  
 Director of Budget  
 and Staff

DEPARTMENT OF STATE  
 WASHINGTON 25, D. C.

121-250-104

NOTIFICATION OF PERSONNEL ACTION

00255

SEARCHED  
 BY  DATE

|   |                  |                          |         |
|---|------------------|--------------------------|---------|
| 1. NAME (Mr., Mrs., One given name, initial(s) and surname) | 2. DATE OF BIRTH | 3. FEDERAL CS OFFICE NO. | 4. DATE |
|   |                  |                          | 3-26-59 |

|  |                   |   |
|--|-------------------|---|
| 5. NATURE OF ACTION (Use standard terminology) | 6. EFFECTIVE DATE | 7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY |
| Limited Appointment                            | 5/8/59            | Section 522.1<br>FL 724 - 79th as amended |

|   |                              |
|---|------------------------------|
| 8. POSITION TITLE<br>Diplomatic or Consular Title | 9. ANNUAL SALARY<br>\$11,660 |
| 10. OCCASIONAL OCCUPATIONS<br>Pod                 |                              |
| 11. HEADQUARTERS                                  |                              |
| 12. CS CATEGORY<br>PS (Category)                  |                              |

FIELD  DEPARTMENTAL  
 Regular  Resident  Non-US  
 Field  Departmental  
 Regular  Resident  Non-US

|   |                                    |                    |  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
|---|------------------------------------|--------------------|--|----|--|--|------|-------|--|---|--|--|---|-----|-----|------|------|--|--|--|--|--|---|--|--|
| 13. VETERAN'S PREFERENCE  | 14. POSITION CLASSIFICATION SYMBOL |                    |  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
| <table border="1"> <tr> <td>None</td> <td>5</td> <td>10</td> <td>15</td> </tr> <tr> <td></td> <td></td> <td>Dis.</td> <td>Other</td> </tr> <tr> <td></td> <td>X</td> <td></td> <td></td> </tr> </table> | None                               | 5                  | 10   | 15 |  |  | Dis. | Other |  | X |  |  | <table border="1"> <tr> <td>GSV</td> <td>WAV</td> <td>T.A.</td> <td>WILL</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>X</td> <td></td> <td></td> </tr> </table> | GSV | WAV | T.A. | WILL |  |  |  |  |  | X |  |  |
| None  | 5                                  | 10                 | 15   |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
|   |                                    | Dis.               | Other  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
|   | X                                  |                    |  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
| GSV   | WAV                                | T.A.               | WILL   |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
|   |                                    |                    |  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
|   | X                                  |                    |  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
| 15. APPROPRIATION   | 16. OFFICE SYMBOL                  | 17. DATE OF EXPIRY | 18. LABOR RESOURCES  |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |
| 11-4013   | 3-1011-333                         | 5/8/59             | CLAIMED <input type="checkbox"/> OPENED <input type="checkbox"/> |    |  |  |      |       |  |   |  |  |   |     |     |      |      |  |  |  |  |  |   |  |  |

19. This action is subject to all applicable test rules and regulations and may be subject to investigation and approval by the United States Civil Service Commission or its Department.

Marital Status - Married - Six

Military Reserve Status - None

Appointment limited to 5 years or end of employee's services, whichever is less.

Execute 27-61a.

PERSONNEL INFORMATION CENTER

EMPLOYEE COPY

SECRET

REQUEST FOR PERSONNEL ACTION

|               |  |                             |  |                                 |                  |                     |               |              |        |             |             |              |  |
|---------------|--|-----------------------------|--|---------------------------------|------------------|---------------------|---------------|--------------|--------|-------------|-------------|--------------|--|
| 1. Serial No. |  | 2. Name (Last-First-Middle) |  |                                 | 3. Date Of Birth |                     | 4. Vac. Prof. |              | 5. Sex |             | 6. GS-FCB   |              |  |
|               |  |                             |  |                                 | Mo. Da. Yr.      |                     | Code          |              | M I    |             | Mo. Da. Yr. |              |  |
| 08 06 42      |  |                             |  |                                 |                  |                     | 1             |              |        |             | 09 28 52    |              |  |
| 7. SCD        |  | 8. CSC Point                |  | 9. CSC Or Other Legal Authority |                  | 10. Admt. Aft. Adv. |               | 11. FGI      |        | 12. LCD     |             | 13. Special  |  |
| Mo. Da. Yr.   |  | Yr. - 1 Code                |  |                                 |                  | Mo. Da. Yr.         |               | Yr. - 1 Code |        | Mo. Da. Yr. |             | Yr. - 1 Code |  |
| 08 06 42      |  | 1 No - 2 1                  |  | 50 USCA 403                     |                  |                     |               | 1 1          |        | 09 28 52    |             | 1 No - 2 2   |  |

PREVIOUS ASSIGNMENT

|   |  |                              |  |        |  |                                  |  |                      |  |                          |  |
|---|--|------------------------------|--|--------|--|----------------------------------|--|----------------------|--|--------------------------|--|
| 14. Organizational Designations         |  |                              |  | Code   |  | 15. Location Of Official Station |  |                      |  | Station Code             |  |
| DDP FE<br>FI CI STAFF                   |  |                              |  | 5113   |  | WASH., D. C.                     |  |                      |  | 75013                    |  |
| 16. Dept. - Field                       |  | 17. Position Title           |  |        |  | 18. Position No.                 |  | 19. Serv.            |  | 20. Occup. Series        |  |
| Dept. Code<br>USStd. Code<br>Frgn. Code |  | I.O. FI STF CH               |  |        |  | 3442                             |  | GS                   |  | 0136.51                  |  |
| 21. Grade & Step                        |  | 22. Salary Or Rate           |  | 23. SD |  | 24. Date Of Grade                |  | 25. PSI Due          |  | 26. Appropriation Number |  |
| 15 1                                    |  | \$ 12770<br><del>12770</del> |  | DI     |  | Mo. Da. Yr. 12 15 57             |  | Mo. Da. Yr. 05 14 59 |  | 9 3700 20 001            |  |

ACTION

|                      |  |      |  |                      |  |                      |  |      |  |                     |  |
|----------------------|--|------|--|----------------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date        |  | 29. Type Of Employee |  | Code |  | 30. Separation Date |  |
| Resignation          |  | 75   |  | Mo. Da. Yr. 05 03 59 |  | Regular              |  | 01   |  |                     |  |

PRESENT ASSIGNMENT

|  |  |                    |  |        |  |                                  |  |             |  |                          |  |
|--|--|--------------------|--|--------|--|----------------------------------|--|-------------|--|--------------------------|--|
| 31. Organizational Designations                      |  |                    |  | Code   |  | 32. Location Of Official Station |  |             |  | Station Code             |  |
| DDP/SE<br>Office of the Chief <i>deputy for ops.</i> |  |                    |  | 51     |  |                                  |  |             |  | 51587                    |  |
| 33. Dept. - Field                                    |  | 34. Position Title |  |        |  | 35. Position No.                 |  | 36. Serv.   |  | 37. Occup. Series        |  |
| Dept. Code<br>USStd. Code<br>Frgn. Code              |  | Area Ops Off       |  |        |  | 26136                            |  |             |  | 0136.01                  |  |
| 38. Grade & Step                                     |  | 39. Salary Or Rate |  | 40. SD |  | 41. Date Of Grade                |  | 42. PSI Due |  | 43. Appropriation Number |  |
|  |  | \$                 |  |        |  | Mo. Da. Yr.                      |  | Mo. Da. Yr. |  | 9-3735-55-005            |  |

SOURCE OF REQUEST

|                                  |  |  |  |
|----------------------------------|--|--|--|
| A. Requested By (Name And Title) |  | C. Request Approved By (Signature And Title) |  |
| <i>Mozelle Little</i>            |  | <i>[Signature]</i>                           |  |

U. For Additional Information Call (Name & Telephone Etc.)  
Mozelle Little X2957

CLEARANCES

|                   |      |             |           |      |
|-------------------|------|-------------|-----------|------|
| Clearance         | Date | Clearance   | Signature | Date |
| A. Career Award   |      | D. Foreign  |           |      |
| B. Pay Control    |      |             |           |      |
| C. Classification |      | H. Approval |           |      |

Remarks: Please transfer from Vouchered to Unvouchered funds on 1 May 1959.  
2 Copies to Security.  
Recorded by: [Signature]

**SECRET**

(When Filled In)

|               |                             |                                 |                  |                    |               |          |               |
|---------------|-----------------------------|---------------------------------|------------------|--------------------|---------------|----------|---------------|
| DATE PREPARED |                             | REQUEST FOR PERSONNEL ACTION    |                  |                    |               | V to V   | Y to UV       |
| Mo            | Da                          |                                 |                  |                    |               | Yr       | UV to V       |
| 1. Serial No. | 2. Name (Last-First-Middle) |                                 | 3. Date of Birth |                    | 4. Ver. Pref. | 5. Sex   | 6. CS - EOU   |
|               |                             |                                 | Mo Da Yr         | Name-0<br>10 Pr-2  |               | N        | Mo Da Yr      |
| 7. SCD        | 8. CSC Reimr.               | 9. CSC Or Other Legal Authority |                  | 10. Appt. Affidav. | 11. FEGLI     | 12. LCO  | 13. GREGG LCO |
| Mo Da Yr      | Yes-1<br>No-2               | Code                            |                  | Mo Da Yr           | Yes-1<br>No-2 | Mo Da Yr | Yes-1<br>No-2 |

**PREVIOUS ASSIGNMENT**

|   |                    |                                     |                                  |             |                          |
|---|--------------------|-------------------------------------|----------------------------------|-------------|--------------------------|
| 14. Organizational Designations             |                    | Code                                | 15. Location Of Official Station |             | Station Code             |
| DDP/FE<br>Office of the Chief of Operations |                    |                                     |                                  |             |                          |
| 16. Dept. Field                             | 17. Position Title |                                     | 18. Position No.                 | 19. Serv.   | 20. Occup. Series        |
| Dept. Valid. From                           | Code               | Deputy for Operations - Ops Officer | 3936                             | GS          | 0136.01                  |
| 21. Grade & Step                            | 22. Salary Or Rate | 23. SD                              | 24. Date Of Grade                | 25. PSI Due | 26. Appropriation Number |
| 15  | 12,770             | DI                                  | Mo Da Yr                         | Mo Da Yr    |                          |

**ACTION**

|                      |      |               |                      |      |                     |
|----------------------|------|---------------|----------------------|------|---------------------|
| 27. Nature Of Action | Code | 28. Eff. Date | 29. Type Of Employee | Code | 30. Separation Date |
|                      | 58   | 5, 8, 59      | R                    | OMI  |                     |

**PRESENT ASSIGNMENT**

|                                 |                    |        |                                  |             |                          |
|---------------------------------|--------------------|--------|----------------------------------|-------------|--------------------------|
| 31. Organizational Designations |                    | Code   | 32. Location Of Official Station |             | Station Code             |
|                                 |                    |        |                                  |             |                          |
| 33. Dept. Field                 | 34. Position Title |        | 35. Position No.                 | 36. Serv.   | 37. Occup. Series        |
| Dept. Valid. From               | Code               | (when) |                                  |             |                          |
| 38. Grade & Step                | 39. Salary Or Rate | 40. SD | 41. Date Of Grade                | 42. PSI Due | 43. Appropriation Number |
| 3                               | 11,660             |        | 10/15/57                         | 6/14/59     | 9-3785-35-005            |

**SOURCE OF REQUEST**

|  |  |
|--|--|
| A. Requested By (Name And Title)                           | C. Request Approved By (Signature And Title) |
| OP/RR/CD/KCL   |  |
| B. For Additional Information Call (Name & Telephone Ext.) |  |
| x8164  |  |

**CLEARANCES**

| Clearance  | Signature | Date           | Clearance      | Signature | Date |
|--|-----------|----------------|----------------|-----------|------|
| A. Career Board  |           |                | D. Placement   |           |      |
| B. Pers. Control   |           | 14 MAY 27 1958 | E.             |           |      |
| C. Classification  |           |                | F. Approved By |           |      |
| Remarks: All sick and 160 annual leave to be transferred to Department of State. |           |                |                |           |      |

**SECRET**

S-E-C-R-E-T

This Notice Expires 1 July 1959

N 20-190-160

NOTICE  
NO. 20-190-160

PERSONNEL  
14 July 1958

ANNOUNCEMENT OF ASSIGNMENTS TO KEY POSITIONS

PANEL OF EXAMINERS OF THE CIA SELECTION BOARD

In accordance with paragraph 5b of Regulation No. 20-105, The Career Staff of the Central Intelligence Agency, the Director of Central Intelligence has appointed the following persons, as members of the Panel of Examiners for the period 1 July 1958 through 30 June 1959.

| Name | Service Designation | Organizational Component |
|------|---------------------|--------------------------|
|      |                     |                          |

S-E-C-R-E-T



S-E-C-R-E-T

W 20-190-160

NOTICE  
NO. 20-190-160

PERSONNEL  
14 July 1958

| <u>NAME</u> | <u>Service<br/>Designation</u> | <u>Organizational<br/>Component</u> |
|-------------|--------------------------------|-------------------------------------|
|-------------|--------------------------------|-------------------------------------|

|                    |  |  |
|--------------------|--|--|
| [Redacted Content] |  |  |
|--------------------|--|--|

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE:

I. K. White  
Deputy Director  
(Support)

DISTRIBUTION: A, plus each member  
of the Panel of Examiners

SECRET

Classify According To Content.

| REQUEST FOR PERSONNEL ACTION |  |                             |                   |  |                                 |                  |  |                               |  |             |                   |              |          |  |                   |  |
|------------------------------|--|-----------------------------|-------------------|--|---------------------------------|------------------|--|-------------------------------|--|-------------|-------------------|--------------|----------|--|-------------------|--|
|                              |  |                             |                   |  |                                 |                  |  |                               |  |             |                   | 19 Nov. 1957 |          |  |                   |  |
| 1. Serial No.                |  | 2. Name (Last-First-Middle) |                   |  |                                 | 3. Date Of Birth |  | 4. Vet. Pref.                 |  | 5. Sex.     |                   | 6. CS - EOD  |          |  |                   |  |
|                              |  |                             |                   |  |                                 |                  |  | None-0<br>5 - Pt-1<br>10 Pt-2 |  | Code<br>I M |                   | Mo Da Yr     |          |  |                   |  |
| 7. SCD                       |  |                             | 8. CSC Rating     |  | 9. CSC Or Other Legal Authority |                  |  | 10. Apmt. Affidav.            |  |             | 11. FEGLI         |              | 12. LCD  |  | 13. Cost. LCC     |  |
| Mo Da Yr                     |  |                             | Yes - 1<br>No - 2 |  |                                 |                  |  | Mo Da Yr                      |  |             | Yes - 1<br>No - 2 |              | Mo Da Yr |  | Yes - 1<br>No - 2 |  |

PREVIOUS ASSIGNMENT

|  |  |                    |  |                  |  |                                  |  |                   |  |                          |  |  |
|--|--|--------------------|--|------------------|--|----------------------------------|--|-------------------|--|--------------------------|--|--|
| 14. Organizational Designations                  |  |                    |  | Code             |  | 15. Location Of Official Station |  |                   |  | Station Code             |  |  |
| DE/PE<br>FI/CI Staff<br><del>SECTION CHIEF</del> |  |                    |  |                  |  | Washington, D.C.                 |  |                   |  |                          |  |  |
| 16. Dept. - Field                                |  | 17. Position Title |  | 18. Position No. |  | 19. Serv.                        |  | 20. Occup. Series |  |                          |  |  |
| Dept -<br>Usfld -<br>Fran -                      |  | I.O. (FI) Stf Ch   |  | 3448             |  | GS                               |  | 0136.51           |  |                          |  |  |
| 21. Grade & Step                                 |  | 22. Salary Or Rate |  | 23. SD           |  | 24. Date Of Grade                |  | 25. PSI Due       |  | 26. Appropriation Number |  |  |
| 14 - 5   |  | \$ 11,180.00       |  | DI               |  | Mo Da Yr                         |  | Mo Da Yr          |  | 8-3700-20 <i>CH</i>      |  |  |

ACTION

|                      |  |      |  |               |  |                      |  |      |  |                     |  |
|----------------------|--|------|--|---------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date |  | 29. Type Of Employee |  | Code |  | 30. Separation Data |  |
| Promotion            |  | 30   |  | 15 DEC 1957   |  | Regular              |  | 01   |  |                     |  |

PRESENT ASSIGNMENT

|                                 |  |                    |  |                  |  |                                  |  |                   |  |                          |  |  |
|---------------------------------|--|--------------------|--|------------------|--|----------------------------------|--|-------------------|--|--------------------------|--|--|
| 31. Organizational Designations |  |                    |  | Code             |  | 32. Location Of Official Station |  |                   |  | Station Code             |  |  |
|                                 |  |                    |  | 5113             |  |                                  |  |                   |  |                          |  |  |
| 33. Dept. - Field               |  | 34. Position Title |  | 35. Position No. |  | 36. Serv.                        |  | 37. Occup. Series |  |                          |  |  |
| Dept -<br>Usfld -<br>Fran -     |  |                    |  |                  |  |                                  |  |                   |  |                          |  |  |
| 38. Grade & Step                |  | 39. Salary Or Rate |  | 40. SD           |  | 41. Date Of Grade                |  | 42. PSI Due       |  | 43. Appropriation Number |  |  |
| 15 <i>7</i>                     |  | \$ 11,610.00       |  |                  |  | Mo Da Yr                         |  | Mo Da Yr          |  |                          |  |  |

SOURCE OF REQUEST

|   |  |  |  |
|---|--|--|--|
| A. Request Initiated By (Signature And Title)               |  | C. Request Approved By (Signature And Title) |  |
|   |  |  |  |
| D. For Additional Information Call (Name Or Telephone Ext.) |  |  |  |
| Jimmie Dewberry x 2957                                      |  |  |  |

CLEARANCES

|                   |  |           |  |          |  |                |  |           |  |          |  |
|-------------------|--|-----------|--|----------|--|----------------|--|-----------|--|----------|--|
| Clearance         |  | Signature |  | Date     |  | Clearance      |  | Signature |  | Date     |  |
| A. Career Board   |  |           |  | 11/14/57 |  | D. Placement   |  |           |  | 11/14/57 |  |
| B. Pos. Control   |  |           |  | 12/15/57 |  | E.             |  |           |  |          |  |
| C. Classification |  |           |  |          |  | F. Approved By |  |           |  | 11/21/57 |  |

Remarks

SECRET

SECRET

Classify According To Content

**REQUEST FOR PERSONNEL ACTION**

30 August 1957

|               |  |                             |  |                                 |                  |  |  |                                    |  |        |                   |             |          |  |   |  |
|---------------|--|-----------------------------|--|---------------------------------|------------------|--|--|------------------------------------|--|--------|-------------------|-------------|----------|--|---|--|
| 1. Serial No. |  | 2. Name (Last-First-Middle) |  |                                 | 3. Date Of Birth |  |  | 4. Vet. Pref.                      |  | 5. Sex |                   | 6. CS - EOD |          |  |   |  |
|               |  |                             |  |                                 | Mo Da Yr         |  |  | None-0 Code<br>5 Pt-1<br>10 Pt-2 / |  | M      |                   | Mo Da Yr    |          |  |   |  |
| 7. SCD        |  | 8. CSC Reim                 |  | 9. CSC Or Other Legal Authority |                  |  |  | 10. Appt. Affidav.                 |  |        | 11. FEGLI         |             | 12. LCD  |  | 13. <sup>1st Ser.</sup> <sub>Center</sub> LCD |  |
| Mo Da Yr      |  | Yes - 1<br>No - 2           |  |                                 |                  |  |  | Mo Da Yr                           |  |        | Yes - 1<br>No - 2 |             | Mo Da Yr |  | Yes - 1<br>No - 2                             |  |

**PREVIOUS ASSIGNMENT**

|                                  |  |                          |  |                                  |                   |  |              |                   |                          |  |
|----------------------------------|--|--------------------------|--|----------------------------------|-------------------|--|--------------|-------------------|--------------------------|--|
| 14. Organizational Designations  |  | Code                     |  | 15. Location Of Official Station |                   |  | Station Code |                   |                          |  |
| DDP/FE<br>Office of the Chief    |  |                          |  | Washington, D. C.                |                   |  |              |                   |                          |  |
| 16. Dept. Field                  |  | 17. Position Title       |  |                                  | 18. Position No.  |  | 19. Serv.    | 20. Occup. Series |                          |  |
| Dept. - X<br>Usfld. -<br>Frag. - |  | Area Ops Off (Dep Br Ch) |  |                                  | -110              |  | GS           | 0136.01           |                          |  |
| 21. Grade & Step                 |  | 22. Salary Or Rate       |  | 23. SD                           | 24. Date Of Grade |  | 25. PSI Dns  |                   | 26. Appropriation Number |  |
| 14                               |  | \$10,965.00 p/a          |  | DI                               | Mo Da Yr          |  | Mo Da Yr     |                   | 8-3700-20 GP             |  |

**ACTION**

|                      |  |      |               |  |                      |  |  |      |                     |  |
|----------------------|--|------|---------------|--|----------------------|--|--|------|---------------------|--|
| 27. Nature Of Action |  | Code | 28. Eff. Date |  | 29. Type Of Employee |  |  | Code | 30. Separation Data |  |
| Reassignment         |  | 51   | 2 DEC 1957    |  | Regular              |  |  | 01   |                     |  |

**PRESENT ASSIGNMENT**

|   |  |                     |  |   |                   |                |              |                   |                          |  |
|---|--|---------------------|--|---|-------------------|----------------|--------------|-------------------|--------------------------|--|
| 31. Organizational Designations                             |  | Code                |  | 32. Location Of Official Station                      |                   |                | Station Code |                   |                          |  |
| DDP/FE<br>FI/CI Staff                                       |  | 5113                |  | Washington, D. C.                                     |                   |                | DI           |                   |                          |  |
| 33. Dept. Field   |  | 34. Position Title  |  |   | 35. Position No.  |                | 36. Serv.    | 37. Occup. Series |                          |  |
| Dept. -<br>Usfld. -<br>Frag. -                              |  | I. O. (PI) (Stf Ch) |  |   | 3478              |                | GS           | 0136.51           |                          |  |
| 38. Grade & Step  |  | 39. Salary Or Rate  |  | 40. SD  | 41. Date Of Grade |                | 42. PSI Dns  |                   | 43. Appropriation Number |  |
| 14  |  | \$10,965.00 p/a     |  | DI  | Mo Da Yr          |                | Mo Da Yr     |                   | 8-3700-20 GP             |  |
| <b>SOURCE OF REQUEST</b>                                    |  |                     |  |   |                   |                |              |                   |                          |  |
| A. [Redacted]   |  |                     |  | C. Request Approved By (Signature And Title)          |                   |                |              |                   |                          |  |
| B. [Redacted]<br>Telephone Ext.)                            |  |                     |  | Approved By US Career<br>Service Panel<br>[Signature] |                   |                |              |                   |                          |  |
| <b>CLEARANCES</b>   |  |                     |  |   |                   |                |              |                   |                          |  |
| Clearance   |  | Signature           |  | Date  |                   | Clearance      |              | Date              |                          |  |
| A. Career Board   |  |                     |  | 11/1/57   |                   | D. Placement   |              | 1 OCT 57          |                          |  |
| B. Pos. Control   |  |                     |  |   |                   | E.             |              |                   |                          |  |
| C. Classification   |  |                     |  |   |                   | F. Approved By |              | Robert W. Shroy   |                          |  |
| Remarks   |  |                     |  |   |                   |                |              |                   |                          |  |
| Please double slot with [Redacted] who is to be reassigned. |  |                     |  |   |                   |                |              |                   |                          |  |
| APPROVED BY PERSONNEL MANAGEMENT COMMITTEE                  |  |                     |  |   |                   |                |              |                   |                          |  |

FORM 1152a  
3-57

u/o FILE

SECRET

SECRET

(When Filled In)

DD/P PERSONNEL DATA SHEET

[Redacted Box]

DATE: 30 AUGUST 1957

WASHINGTON, D. C.  
ATTN: I.O. (FI) STFC

DD/P UNIT: FE  
REASSIGNMENT

PRIMARY CAREER  
DESIGNATION: DI

PRESENT GRADE: GS-14  
PROPOSED GRADE: GS-14

TRAINING: OPERATIONAL MGT, CSR, CLAND  
DOC, S/W, SIC, TSS BRIEFING

PREVIOUS T/O SLOT  
NUMBER AND GRADE:  
MET & TECH,  
PROPOSED T/O SLOT  
NUMBER AND GRADE:

BF-67-15

BF-110-14

[Redacted Box]

ASSESSED:

DATE:

TYPE OF POSITION:

RESULTS:

[Redacted Box]

RECOMMENDED BY:

CONCURRENCES:

ALFRED C. ULMER, JR., CFE

RECOMMENDATION OF CAREER SERVICE BOARD:

APPROVED BY FIELD OFFICER IN CHARGE  
[Signature]

SECRET

21 AUG 1957

MEMORANDUM FOR: Clandestine Services Career Service Board

SUBJECT:  -- Recommendation for Promotion  
from GS-14 to GS-15

1.  entered on duty with CIA on 28 September 1952

Alfred C. Ulmer, Jr.  
Chief, Far East Division

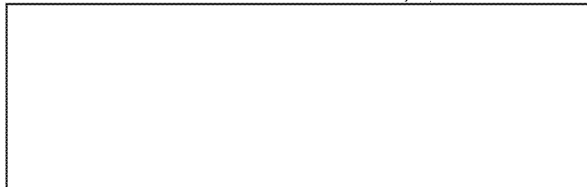
SECRET

5 APR 1957

MEMORANDUM FOR: Acting Chairman, FI Career  
Service

SUBJECT: Nominations for Replacement of FE  
Consultants to FI Career Service

The following individuals are nominated to re-  
place those Consultants from the FE Division to the  
FI Career Service, who will no longer be available  
for such duty:



ALFRED G. ULMER, JR.  
Chief, Far East Division

APR 11 1957

APR 11 1957

S-E-C-R-E-T

This Notice Expires 20 April 1957

CLANDESTINE SERVICES  
NOTICE NO. 1-104

CSN NO. 1-104

ORGANIZATION  
20 March 1957

PERSONNEL ANNOUNCEMENT

FE DIVISION

Announcement is made of the designation, effective 4 March 1957,  
of  as Acting Chief, FE/7.

Announcement is made of the following designations, effective  
11 March 1957:

FRANK G. WISNER  
Deputy Director (Plans)

Released by:  
Richard Helms  
Chief of Operations

S-E-C-R-E-T

S-E-C-R-E-T

FE NOTICE NO. 30-11  
CHANGE 2

FINAL  
7 March 1957

**FAR EAST DIVISION NOTICE**

**SUBJECT: FE NOTICE NO. 30-11, "FE Division Approving Officers"**

1. Effective 4 March 1957, paragraph 1,k of FE Notice No. 30-11 dated 21 November 1956, should be amended as follows:

[REDACTED]

2. Effective 11 March 1957 paragraph 1,f of FE Notice No. 30-11 dated 21 November 1956, should be amended as follows:

[REDACTED]

3. Effective 11 March 1957 paragraph 1,i of FE Notice No. 30-11 dated 21 November 1956, should be amended as follows:

[REDACTED]

[REDACTED]  
APPROVED BY: [REDACTED] JR. //  
Chief, Far East Division

Distribution:  
FE Staff and Branches  
USA/DOE  
RR

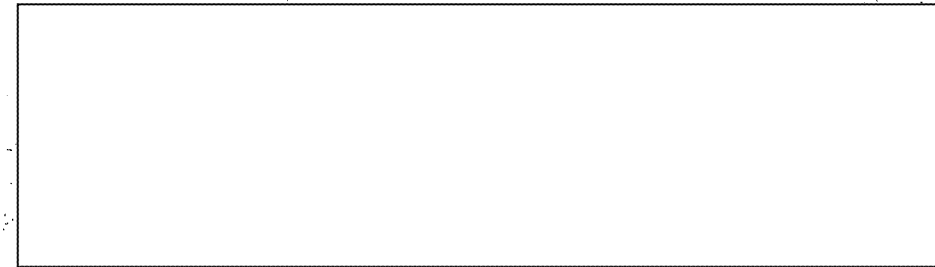
S-E-C-R-E-T



8 January 1957

MEMORANDUM FOR THE RECORD

SUBJECT: Promotion of [redacted] ✓



2. A review of [redacted] Fitness Reports will adequately reflect his strengths and weaknesses, with the possible exception of the most recent one dated 7 July 1956, in which, in undersigned's opinion, the rating officer did not have adequate time to fairly rate [redacted]. Granting his occasional tendency to allow his emotions to color his work, he is, nevertheless, one of the hardest working and generally capable officers I have been associated with. He has great ability in dealing with people, he is an accurate and meticulous reporter, and he is adjusting rapidly to the requirements of his job in Headquarters and is turning in a most effective performance. In view of the length of time in grade, his age, and above all his performance, I strongly recommend [redacted] for promotion from GS-14 to GS-15.

[redacted]  
Chief, FZ/1

CONFIDENTIAL

14-00000

|  |                          |
|--|--------------------------|
| STAN FORM 52<br>REQUEST FOR PERSONNEL ACTION | UNVOUCHERED<br>VOUCHERED |
|--|--------------------------|

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

|   |                  |                                    |                                    |
|---|------------------|------------------------------------|------------------------------------|
| 1. NAME (Mr., Mrs., One given name, initial(s), and surname)  | 2. DATE OF BIRTH | 3. REQUEST NO.                     | 4. DATE OF REQUEST<br>16 Oct. 56   |
| 5. NATURE OF ACTION REQUESTED:<br>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)<br>Reassignment |                  | 6. EFFECTIVE DATE & PROPOSED:      | 7. C. S. OR OTHER LEGAL AUTHORITY: |
| 8. POSITION (Specify whether establish, change grade or title, etc.)  |                  | 9. APPROVED:<br><i>[Signature]</i> |                                    |

|   |  |   |
|---|--|---|
| FROM— I.O. (FI)      EPF-2302<br>GS-0136.51-14    \$10,965. p/a<br>DDP/FE       | 8. POSITION TITLE AND NUMBER:<br>9. SERVICE GRADE AND SALARY:<br>10. ORGANIZATIONAL DESIGNATIONS:<br>11. HEADQUARTERS: | TO— Area Ops Off - Dep Br. Ch. EP-110<br>GS-0136.01-14    \$10,965. p/a<br>DDP/FE<br>Office of the Chief<br>Washington D.C. |
| <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL | 12. FIELD OR DEPARTMENTAL  | <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL   |

13. REMARKS (Use reverse if necessary)  
 Subject is transferring from UNVOUCHERED to VOUCHERED funds.  
 Subject's W-4 and Form D-4 attached.  
 Subject's Personnel Data Sheet attached.

|   |   |
|---|---|
| 14. REQUEST APPROVED BY<br><i>[Signature]</i><br>Signature:<br>Title: | 14. Nov 56<br>Approved by GS Chief<br>Division Chief<br>23 Nov 56 |
|---|---|

|   |                                    |  |   |  |
|---|------------------------------------|--|---|--|
| 15. VETERAN PREFERENCE  | 16. APPROPRIATION                  | 17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) | 18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | 19. LEGAL RESIDENCE  |
| NONE <input checked="" type="checkbox"/> NEW <input type="checkbox"/> OTHER <input type="checkbox"/> SPT. <input type="checkbox"/> 10 POINT <input type="checkbox"/><br>DISAB <input type="checkbox"/> OTHER <input type="checkbox"/> | FROM 7-3735-55-005<br>TO 7-3700-20 | Yes  |   | <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED<br>STATE: |

20. STANDARD FORM 50 REMARKS

*[Handwritten notes and signatures]*

|                        |                      |           |         |
|------------------------|----------------------|-----------|---------|
| 21. CLEARANCES         | INITIAL OR SIGNATURE | DATE      | REMARKS |
| A.                     |                      |           |         |
| B. CEIL OR PCS CONTROL | <i>[Signature]</i>   | 30 Nov 56 |         |
| C. CLASSIFICATION      |                      |           |         |
| D. PLACEMENT OR ENPL   | <i>[Signature]</i>   | 23 Nov 56 |         |

22. STANDARD FORM 50 REMARKS

*[Handwritten notes]*

SECRET  
(when filled in)

DD/P

PERSONNEL DATA SHEET

NAME: [ ] AGE: 41 DATE: 16 October 1956

STATION Washington D.C. PRIMARY CAREER  
AND DUTIES: DD/P UNIT: FE/1 DESIGNATION: DI  
Area Ops. Officer - Dep. Br. Chief

PRESENT GRADE: GS-14 PRESENT T/O SLOT BFF-2302  
PROPOSED GRADE: GS-14 NUMBER AND GRADE: GS-0136.51-14  
CIA TRAINING: BOC, OC, SW, SIC PROPOSED T/O SLOT BR-110  
TSS Briefing, CSR NUMBER AND GRADE: GS-0136.01-14

EDUCATION: [ ] B.A.  
LANGUAGE PRO: [ ]

ASSESSED: DATE: TYPE OF POSITION: RESULTS:

EXPERIENCE PRIOR TO CIA (excluding SSU-OSS):  
June 1946 - Sept. 1952 - U.S. Dept. of Army - Tokyo, Japan - Intell Specialist  
June 1942 - June 1946 - U.S. Navy - Language Officer, Intel specialist

SUMMARY OF CIA-SSU-OSS ASSIGNMENTS INCLUDING PREVIOUS GRADES AND DATES  
[ ]

RECOMMENDED BY: [ ]

CONCURRENCES:

RECOMMENDATION OF CAREER SERVICE BOARD:

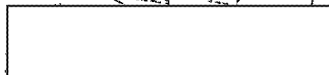
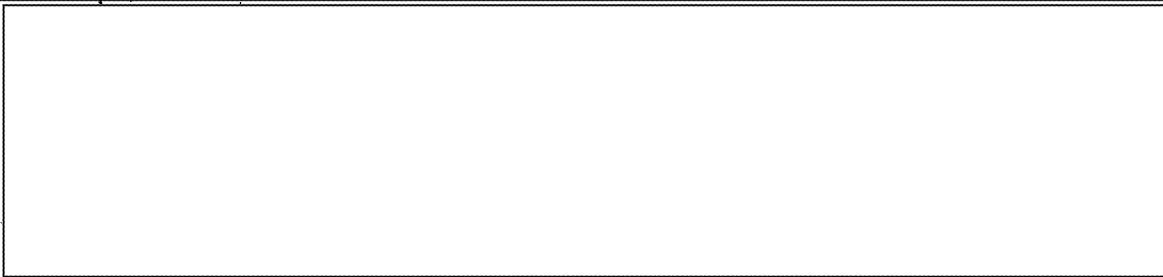
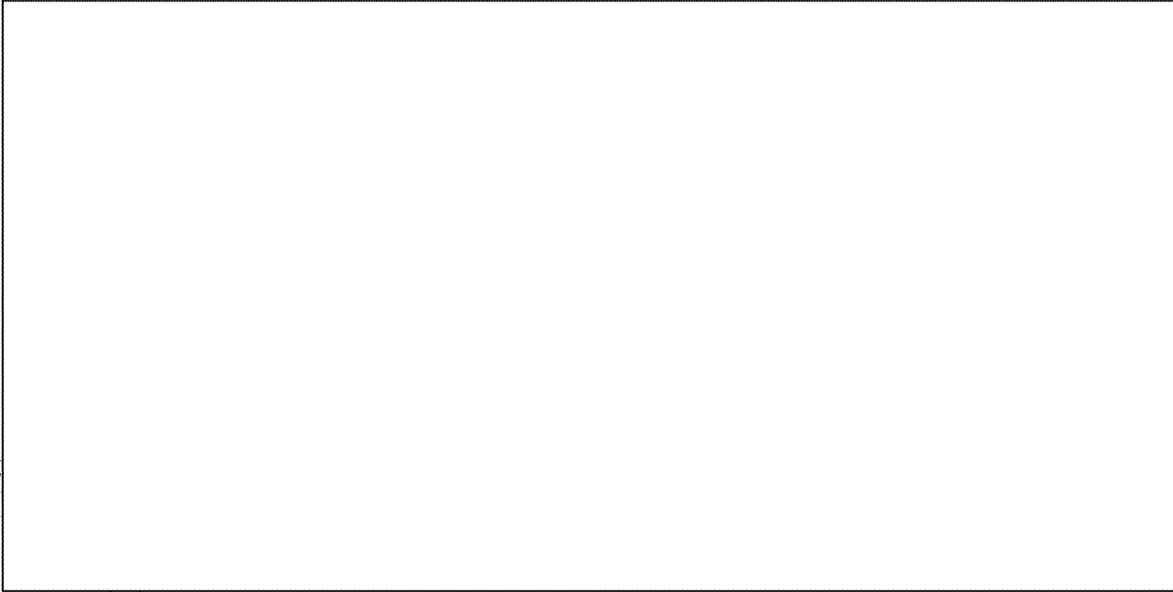
APPROVED BY [ ]

NOV 12 11 22 AM '56

OFFICE OF PERSONNEL

SECRET

SECRET



MAIL ROOM

MAY 26 11 59 AM '53

OFFICE OF PERSONNEL

SECRET

*Office Memorandum* • UNITED STATES GOVERNMENT

TO : DI Career Service Board

DATE: 19 December 1955

FROM : Chief, FE

SUBJECT:

ATTACHMENT:

George S. AURELL  
Chief, FE

APPROVED:

DI Career Board

VIA AIR  
(Specify Air or Sea Route)

RYBAT

DISPATCH NO. [ ] 7751

**SECRET**  
CLASSIFICATION

5 DEC 1955

TO Chief, FE

DATE 30 November 1955

FROM Chief, [ ]

INFO: COS/IA

SUBJECT GENERAL Administrative/Personnel  
SPECIFIC [ ]

1. Attached is a rotation data sheet on [ ]
2. As you will note [ ] lists as his first choice [ ]
3. While it is realized that [ ] has not had a regular tour at Headquarters,

[ ]

1. [ ] has a unique knowledge of [ ] and has a continuity of service that makes his service invaluable.
5. During the next couple of years [ ] gradually reduces in size, and while [ ] are still in a receptive mood it is felt that such can be accomplished through [ ] efforts. It is therefore felt that [ ]'s experience can be to the maximum benefit to KUBARK by his return here for another tour.
6. In order to assist [ ] in its planning, an early answer will be appreciated.

[ ]

[ ]

Attachment:

1. Rotation Data Sheet: [ ]

Distributions:

- Orig & 2 - Chief, FE, w/attach.
- 1 - COS/IA, w/o attach.

RYBAT

**SECRET**  
CLASSIFICATION

*OK*  
*[Signature]*

VIA AIR  
(Specify Air or Sea Route)

DISPATCH NO.    7285

**SECRET**  
CLASSIFICATION

TO Chief, FE DATE 28 OCT 1955

FROM Chief,    INFO: COS/IA  
    FE Support Base

SUBJECT { GENERAL Administration/Personnel     
          SPECIFIC Recommendation for Promotion of

REF   

   pursuance of recommendation submitted in Ref, it is requested that    be considered for promotion from the grade of GS-11 to GS-15. Subject has been in grade since 27 September 1955. He occupies a GS-15 slot.

2. Subject has been in his present position for approximately one year and has been under my supervision for 22 months.
3. Subject has made an unusual contribution to the work of the base through:
  - a. His outstanding leadership;
  - b. His almost unique knowledge of the area;
  - c. His ability to deal on a close personal basis with individuals on the highest levels; and
  - d. His quick and often brilliant assessment and solution of many of the important day-to-day problems of the base.
4. These qualities coupled with his strong devotion to duty fully warrant, in my opinion, his promotion to the grade of GS-15.

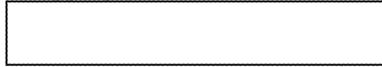
- Attachment:
1. Job Description:
- 16 October 1955
- Distribution:
- 1 - Addressee, w/attach.
  - 1 - COS/IA, w/attach.
  - 1 - FE Support Base, w/attach.

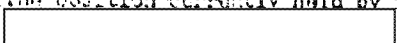
*Cancelled  
for CFE  
Dec 55*

    
CLASSIFICATION

SECRET

CLASSIFICATION



1. The position currently held by incumbent is two-fold: a. Deputy for . These two positions will be described separately.

2.



3.





SECRET

- 2 -

4.

5.

6.

7. I certify that the above described duties are true and correct.

rel

AS/

SECRET

SECRET

Office Memorandum • UNITED STATES GOVERNMENT

TO : FI Career Service Board

DATE: 26 January 1955

FROM : Chief, FE

SUBJECT: [redacted] — Extension of Overseas Tour

ATTACHMENT: [redacted], dated 13 January 1955

1. Subject's request for extension of overseas tour contained in the attachment is forwarded for your approval.

2. [redacted] entered on duty with the Agency in the field on 28 September 1952. He completed his two-year tour on 23 September 1954 and requests that his tour be extended to 28 September 1956.

3. The above request has the concurrence of the Chief [redacted] Chief, FE/1.

[redacted signature box]

for George E. AURELL  
Chief, FE

APPROVED:

[redacted signature box]

FI Career Service Board

Orig: [redacted] x - 3332

SECRET

VIA AIR  
Priority Air or Sea Mails

DISPATCH NO. [REDACTED]

[REDACTED]  
CLASSIFICATION

13 JAN 1955

TO : Chief, FS

DATE \_\_\_\_\_

FROM :

[REDACTED]

INFO: Support Mission

SUBJECT

GENERAL: Administrative - Personnel

SPECIFIC:

[REDACTED]

Request for Extension of Overseas Duty

[REDACTED] completed his two-year overseas tour on 28 September 1954. Subject requests an extension to 28 September 1956. The Chief of Mission concurs in this request.

[REDACTED]

Acting Chief, Personnel Section

Distribution:

- 4 - Headquarters
- 1 - Support Mission

[REDACTED]  
CLASSIFICATION

SECRET

*Robert A. Ascham*

11 June 1954

MEMORANDUM

TO : [redacted]

FROM : Chief of Mission

SUBJECT: Commendation

1. It gives me very great pleasure to forward herewith a personal commendation to you from Robert A. ASCHAM, Chief, KUBARK. This commendation was transmitted to the [redacted] the Senior Representative, [redacted] who requested that his personal appreciation be extended to you.

2. Your performance in the case which resulted in ASCHAM's commendation reflects great credit upon KUBARK in general and upon [redacted] in particular, as well as indicating conclusively your outstanding professional and executive capabilities in the direction and conduct of intelligence activities.

3. I wish to take this opportunity to offer my congratulations and to extend my personal thanks and appreciation.

[redacted]

SECRET

MAY 1 1954

TO : [REDACTED]

SUBJECT : Commendation

1. It is a very real pleasure for me to be able to acknowledge the excellent manner in which you carried out your duties as officer in charge of the direct handling of the [REDACTED] case. You are to be particularly commended on the manner in which you adjusted to a type of operation with which you had never previously been directly concerned, on the personal rapport which you developed with [REDACTED] and the good judgment displayed in anticipating and dealing with difficult personality problems, and on your understanding of the broad policy problems implicit in this case.

2. I wish to assure you that your substantial contributions to the success of this operation, as well as the personal inconvenience caused by your precipitate and prolonged departure from your family, are fully appreciated. You are further commended on the demonstrated fact that this personal inconvenience in no way affected either your effectiveness or your contagious enthusiasm which contributed so much to this operation.

3. Copies of this letter are being forwarded for the Chief, [REDACTED] and the Senior Representative, [REDACTED], as well as to your permanent personnel file at headquarters.

  
ROBERT A. ASCHAM

SECRET

PERSONNEL TRANSFER AND CLEARANCE SHEET

3 October 1952

TO: Chief, FE

FROM:

1.

Branch:

2. Detached from:

Ordered to: Washington, D. C.

On Temporary Duty for 90 days and return

3. Approximate date of departure: 3 October 1952. Travel by air.

4. Monthly salary allotment in the field: \$400. Not yet effective.

Overall base pay per annum: \$9600 Marital status: Married

5. Allowances: 10% Differential. Not yet effective.

6. Per Diem: Not applicable

7. Unaccounted or unpaid advances at time of detachment:

8. Leave used at this station: None

Accumulated leave to date of detachment: Unknown

Additional Remarks: Subject entered on duty in the field 28 September 1952. Transfer of leave record has not yet been accomplished. Salary and 10% differential have not been paid.

FOR THE CHIEF,

VIA: AIR  
SPECIFY AIR OR SEA POUCH

DISPATCH NO.

SECRET  
Security Information  
CLASSIFICATION

TO : Chief, FE

DATE: 30 September 1952

FROM : Chief,

SUBJECT: GENERAL Administration - Personnel

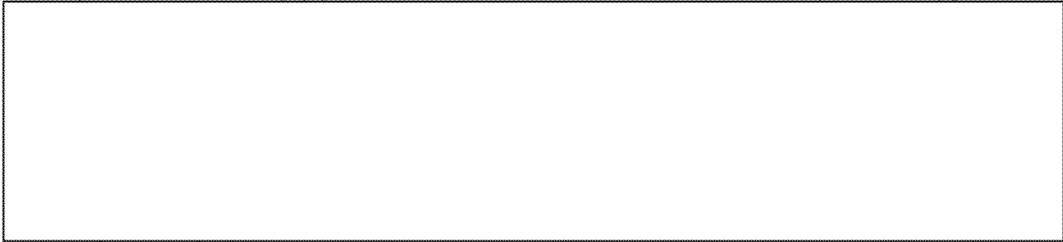
SPECIFIC:  Completion of Personnel Forms

REFERENCE:  17 March 1952

ATTACHMENTS:

- (a) Form W-4
- (b) Form 61
- (c) Secrecy Agreement (dup)
- (d) SF 78 (in lieu of Form 88)
- (e) Letter of Appointment (dup)
- (f) SF 2806
- (g) Form 37-79 (dup)
- (h) Form 37-50
- (i) Memorandum of Field Allowance dated 28 September 1952 (dup)
- (j) True Signature Form (dup)
- (k) Personnel Transfer and Clearance Sheet (quad) (See Report)

1. Transmitted herewith are completed personnel forms for subject employee.
2. Standard Form 2808, Designation of Beneficiary, is withheld by this Unit. Designated beneficiary as indicated by Retirement Act order of preference is satisfactory to subject.
3. Reference attachment (j), Acknowledgement of Pseudonym Forms will follow.
4. Attachment (k) is submitted in accordance with Field Regulation 30-3.



SECRET  
CLASSIFICATION  
RI COPY

11-1-7 912

SECRETARY AGREEMENT

1. I, [redacted] understand that by virtue of my duties in the [redacted], I may be the recipient of information and intelligence which concerns the present and future security of the United States and which belongs to the United States. This information and intelligence, together with the methods of collecting and handling it, are classified according to security standards set by the [redacted]. I have read and understand the provisions of the Act of Congress of June 15, 1917, (Espionage Act) as amended, concerning the disclosure of information relating to the National Defense and I am familiar with the penalties provided for violation thereof.

2. I agree that I do not now, nor shall I ever possess any right, interest, title or claim in or to any of the information or intelligence or the methods of collecting or handling of it which has come or shall come to my attention by virtue of my connection with the [redacted], but shall always recognize the property right of the United States of America in and to such matters.

3. I do solemnly swear that I will never divulge, publish nor reveal either by word, conduct, or any other means such classified information, intelligence or knowledge, except in the performance of my official duties and in accordance with the laws of the United States, unless specifically authorized in writing in each case by the Director, [redacted].

4. I understand that no change in my assignment or employment will relieve me of my obligation under this oath and that the provisions of this oath will remain binding upon me even after the termination of my services with the United States.

5. I take this obligation freely, without any mental reservation or purpose of evasion.

In witness whereof I have set my hand and seal this 28<sup>th</sup> day of September 1952.

Sworn to before me this 23<sup>rd</sup> day of [redacted]

[redacted]

[redacted]

Michael [redacted]



1499

VIA: AIR  
(SPECIFY AIR OR SEA ROUTE)

DISPATCH NO.

SECRET  
SECURITY INFORMATION  
CLASSIFICATION

AUG. 28. 1953

TO : Chief, FE

DATE: AUG. 28. 1953

FROM : Senior Representative

SUBJECT: GENERAL— Administrative - Personnel

SPECIFIC— ~~XXXXXXXXXX~~ Commendation of

Attachment (1) Dispatch No.  dtd 17 August 1953 under the above subject

It is with pleasure that I endorse and forward to Headquarters the attached dispatch prepared by the  commanding ~~XXXXXXXXXX~~ for performance of his duties as Chief of Staff

24 August 1953

Distribution

- 3 - HQS - v/3 encls.
- 1 -
- 1 - Registry
- 1 - File

SECRET  
SECURITY INFORMATION  
CLASSIFICATION

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

|   |                        |                 |                |
|---|------------------------|-----------------|----------------|
| NAME  |                        | DATE            |                |
| [Redacted]  |                        | 2 November 1951 |                |
| NATURE OF ACTION  |                        | EFFECTIVE DATE  |                |
| Excepted Appointment  |                        |                 |                |
| TITLE<br>GRADE AND SALARY<br>OFFICE<br>DIVISION<br>BRANCH<br>OFFICIAL STATION | FROM                   | TO              |                |
|   |                        |                 | I.O. (CE)      |
|   |                        |                 | GS-13 \$8360   |
|   |                        |                 | OSO            |
|   |                        |                 | FDZ            |
|   |                        |                 | C - [Redacted] |
| APPROVAL  |                        |                 |                |
| QUALIFICATIONS  | FOR ASSISTANT DIRECTOR | EXECUTIVE       |                |
| [Redacted]  | [Redacted]             | [Redacted]      |                |
| POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS            |                        |                 |                |
| YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>           |                        |                 |                |
| OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON                            |                        |                 |                |
| SECURITY CLEARED ON   |                        |                 |                |
| OVERSEAS AGREEMENT SIGNED   |                        |                 |                |
| ENTERED ON DUTY   |                        |                 |                |
| C # 1817  |                        |                 |                |
| (SIGNATURE OF AUTHENTICATING OFFICER)   |                        |                 |                |
| REMARKS: Attachments: PIE (in duplicate) w/Appendix I, Ltr. of Availability   |                        |                 |                |
| [Redacted]  |                        |                 |                |
| ICM, Requesting Waiver of OSO Reg. 20-1 attached.                             |                        |                 |                |
| Secrecy agreement to be forwarded from the Field.                             |                        |                 |                |
| [Signature]   |                        |                 |                |

**SECRET**  
**SECURITY INFORMATION**  
**TRAINING EVALUATION**

OPERATIONS

**IMPORTANT:** The official to whom this report is entrusted is personally responsible for it. He may show it to other members of his staff or to the student concerned if such action is considered necessary and advisable.  
This report summarizes the test results. Observations and opinions of the various instructors for the course listed only. More complete data are available in the files of the office of Training (Covert), and may be examined after contacting the Training and Evaluation Officer. Any questions as regards the evaluation of this student should be referred to the Chief, Training and Evaluation, TR(C).

|                        |          |          |                      |                   |                 |
|------------------------|----------|----------|----------------------|-------------------|-----------------|
| NAME OF STUDENT (LAST) | INITIALS | INITIALS | AGE                  | GRADE (SS OR BAR) | DATE OF REPORT  |
|                        |          |          | 37                   | GS-16             | 9 December 1952 |
| DIVISION               |          |          | PROJECTED ASSIGNMENT |                   | COURSE NO.      |
| PI    PE    C          |          |          |                      |                   | 40              |

**PERFORMANCE RECORD**

THE FOLLOWING GRADES SHOW THE ACHIEVEMENT OF THE STUDENT IN THE MAJOR ELEMENTS OF THE COURSE. TWO GRADES ARE ASSIGNED IN EACH AREA. ONE FOR COMPREHENSION AND ONE FOR IMPLEMENTATION. A SPECIFIC DEFINITION OF EACH OF THESE TERMS, AS WELL AS OF THE ADJECTIVAL RATINGS EMPLOYED, IS GIVEN ON THE BACK OF THIS EVALUATION FORM.

| MAJOR ELEMENTS | ADJECTIVAL RATINGS |      |       |      |              |      |           |      |          |      |
|----------------|--------------------|------|-------|------|--------------|------|-----------|------|----------|------|
|                | FAILURE            |      | POOR  |      | SATISFACTORY |      | EXCELLENT |      | SUPERIOR |      |
|                | COMP.              | IMP. | COMP. | IMP. | COMP.        | IMP. | COMP.     | IMP. | COMP.    | IMP. |
| 1.             |                    |      |       |      |              | X    | X         |      |          |      |
| 2.             |                    |      |       |      |              | X    | X         |      |          |      |
| 3.             |                    |      |       |      |              | X    | X         |      |          |      |
| 4.             |                    |      |       |      |              |      |           | X    | X        |      |
| 5.             |                    |      |       |      |              |      |           | X    | X        |      |
| 6.             |                    |      |       |      |              |      |           | X    | X        |      |
| 7.             |                    |      |       |      |              |      |           | X    | X        |      |
| 8.             |                    |      |       |      |              |      |           | X    | X        |      |
| 9.             |                    |      |       |      |              |      |           | X    | X        |      |
| 10.            |                    |      |       |      |              |      |           | X    | X        |      |

THE FOLLOWING INDICATES THE VARIOUS TRAITS AS OBSERVED BY THE INSTRUCTORS DURING THE TRAINING PERIOD. THE OBSERVATIONS INCLUDE THE STUDENT'S PARTICIPATION AND CONDUCT IN TRAINING AS WELL AS HIS REACTIONS TO VARIOUS PROBLEMS AND SITUATIONS.

|   |  |  |   |   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
|---|--|--|---|---|---|--|---|--|---|---|---|---|---|---|---|--------------------------|---|---|--|--|---|---|---|---|---|---|---|--|---|--|---|---|---|---|---|--|--|--|---|---|---|---|---|---|---|--|--|--|---|---|--|---|---|---|---|---|--|--|--|--|--|
| <p><b>A. Constructive Imagination (NOT OBSERVED <input type="checkbox"/> )</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Devoid of constructive imagination or inventiveness in approach to problems.</td> <td>Shows only a very limited degree of constructive imagination.</td> <td>Shows sufficient constructive imagination to meet most school situations adequately.</td> <td>Demonstrated the possession of creative ability to a greater than average degree.</td> <td>Outstandingly creative, inventive, or original.</td> </tr> </table> <p><b>B. Astuteness (NOT OBSERVED <input type="checkbox"/> )</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Appeared glib and naive.</td> <td>Exhibited below average astuteness and discernment.</td> <td>Displayed adequate judgment and perceptivity.</td> <td>Displayed above average perceptivity and astuteness.</td> <td>Displayed exceptional shrewdness and perceptivity.</td> </tr> </table> <p><b>C. Industry (NOT OBSERVED <input type="checkbox"/> )</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Did not show sufficient application of time and effort.</td> <td>Applied only the minimum amount of time and effort necessary.</td> <td>Showed adequate compliance as regards time and effort necessary.</td> <td>Volunteered greater time and effort than is normally expected in this course.</td> <td>Was unusually industrious, giving generously of time and effort.</td> </tr> </table> <p><b>D. Initiative (NOT OBSERVED <input type="checkbox"/> )</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Consistently failed to act without being specifically instructed to do so.</td> <td>Generally exhibited a low level of initiative but occasionally acted on his own.</td> <td>Normally took steps to implement ideas without external prompting.</td> <td>Usually displayed enthusiasm and aggressiveness in carrying out projects.</td> <td>Displayed unusual energy, enthusiasm, and aggressiveness.</td> </tr> </table> <p><b>E. Ability to Write (NOT OBSERVED <input type="checkbox"/> )</b></p> <table style="width: 100%;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Seemed unable to express thoughts clearly in written form.</td> <td>Was weak in expressing thoughts clearly in written form.</td> <td>Written work showed no significant weakness.</td> <td>Displayed ability to express thoughts thoroughly in written form.</td> <td>Was outstanding in ability to express ideas in clear, correct, coherent manner.</td> </tr> </table> | 1  | 2  | 3   | 4   | 5 | Devoid of constructive imagination or inventiveness in approach to problems. | Shows only a very limited degree of constructive imagination. | Shows sufficient constructive imagination to meet most school situations adequately. | Demonstrated the possession of creative ability to a greater than average degree. | Outstandingly creative, inventive, or original. | 1 | 2 | 3 | 4 | 5 | Appeared glib and naive. | Exhibited below average astuteness and discernment. | Displayed adequate judgment and perceptivity. | Displayed above average perceptivity and astuteness. | Displayed exceptional shrewdness and perceptivity. | 1 | 2 | 3 | 4 | 5 | Did not show sufficient application of time and effort. | Applied only the minimum amount of time and effort necessary. | Showed adequate compliance as regards time and effort necessary. | Volunteered greater time and effort than is normally expected in this course. | Was unusually industrious, giving generously of time and effort. | 1 | 2 | 3 | 4 | 5 | Consistently failed to act without being specifically instructed to do so. | Generally exhibited a low level of initiative but occasionally acted on his own. | Normally took steps to implement ideas without external prompting. | Usually displayed enthusiasm and aggressiveness in carrying out projects. | Displayed unusual energy, enthusiasm, and aggressiveness. | 1 | 2 | 3 | 4 | 5 | Seemed unable to express thoughts clearly in written form. | Was weak in expressing thoughts clearly in written form. | Written work showed no significant weakness. | Displayed ability to express thoughts thoroughly in written form. | Was outstanding in ability to express ideas in clear, correct, coherent manner. | <table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">2</td> <td style="width: 20px;">3</td> <td style="width: 20px;">4</td> <td style="width: 20px;">5</td> </tr> <tr> <td style="height: 100px;"></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | 1 | 2 | 3 | 4 | 5 |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| Devoid of constructive imagination or inventiveness in approach to problems.  | Shows only a very limited degree of constructive imagination.                    | Shows sufficient constructive imagination to meet most school situations adequately. | Demonstrated the possession of creative ability to a greater than average degree. | Outstandingly creative, inventive, or original.                                 |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| Appeared glib and naive.  | Exhibited below average astuteness and discernment.                              | Displayed adequate judgment and perceptivity.  | Displayed above average perceptivity and astuteness.                              | Displayed exceptional shrewdness and perceptivity.                              |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| Did not show sufficient application of time and effort.   | Applied only the minimum amount of time and effort necessary.                    | Showed adequate compliance as regards time and effort necessary.                     | Volunteered greater time and effort than is normally expected in this course.     | Was unusually industrious, giving generously of time and effort.                |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| Consistently failed to act without being specifically instructed to do so.  | Generally exhibited a low level of initiative but occasionally acted on his own. | Normally took steps to implement ideas without external prompting.                   | Usually displayed enthusiasm and aggressiveness in carrying out projects.         | Displayed unusual energy, enthusiasm, and aggressiveness.                       |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| Seemed unable to express thoughts clearly in written form.  | Was weak in expressing thoughts clearly in written form.                         | Written work showed no significant weakness.   | Displayed ability to express thoughts thoroughly in written form.                 | Was outstanding in ability to express ideas in clear, correct, coherent manner. |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
| 1   | 2  | 3  | 4   | 5   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |
|   |  |  |   |   |   |  |   |  |   |   |   |   |   |   |   |                          |   |   |  |  |   |   |   |   |   |   |   |  |   |  |   |   |   |   |   |  |  |  |   |   |   |   |   |   |   |  |  |  |   |   |  |   |   |   |   |   |  |  |  |  |  |

F. Facility of oral expression (NOT OBSERVED  )

| 1  | 2  | 3   | 4   | 5  |
|--|--|---|---|--|
| Unable to express self clearly. Presented ideas in groping and incoherent fashion. | Lacked fluency or ease in his speech, but meaning usually clear. | Displayed reasonable facility in oral expression. | Spoke confidently, conveying ideas clearly and readily. | Outstanding in fluency and clarity of oral expression. |

G. Ability to Get Along With Associates. (NOT OBSERVED  )

| 1                                    | 2   | 3   | 4   | 5   |
|--------------------------------------|---|---|---|---|
| Frequently alienated his associates. | Failed to win social acceptance but did not actively antagonize others. | Reasonably effective in his social relations. | Displayed definite ability to achieve harmonious relationships with his associates. | Unusually effective in his ability to win acceptance from others. |

H. Ability to Influence His Associates (NOT OBSERVED  )

| 1   | 2  | 3  | 4  | 5   |
|---|--|--|--|---|
| Withdrew from group activities to a marked degree, failing to influence the thinking and actions of others. | Normally socially retiring, opinions rarely affected his associates. | Usually participated in group activities, was fairly successful in selling a point or himself. | Was excellent at influencing others by his own personality and thinking. | Was outstanding in ability to command respect and attention through his personality and thinking. |

I. Tact (NOT OBSERVED  )

| 1                              | 2   | 3                                | 4  | 5  |
|--------------------------------|---|----------------------------------|--|--|
| Markedly blunt and indiscreet. | Frequently said or did something which induced an unfavorable reaction. | Reasonably discreet and tactful. | Had good discernment for the appropriate thing to say or do. | Consistently demonstrated keen perception for fitting speech or conduct. |

J. Adaptation to Training (NOT OBSERVED  )

| 1  | 2   | 3   | 4   | 5   |
|--|---|---|---|---|
| Displayed no interest or enthusiasm for training and failed to adapt himself to the demands made upon him. | Accepted training program reluctantly and had difficulty adapting himself to the training requirements. | Displayed average interest in and acceptance of training. | Exhibited an excellent acceptance of training and readily adapted to demands made upon him. | Outstanding in his acceptance of training and display of enthusiasm and interest. |

COMMENTS

[Large empty box for comments]

*C.F.B.*  
SIGNATURE OF CHIEF INSTRUCTOR

APPROVED

SIGNATURE OF DEPUTY FOR STAFF TRAINING  
*Robert B. Schaffer*

REVIEWED

SIGNATURE OF CHIEF, TRAINING AND EVALUATION  
*[Signature]*

FORM NO. 51-86  
OCT 1951

SECRET

(OVER)

SECRET

**CONFIDENTIAL**  
Security Information

UNITED STATES GOVERNMENT

Sections 1 through 4 completed by employee. Type if possible.

1. NAME (Printed)  TITLE  CAP RATING  SALARY  
  GS-14 \$9600.

Date of assignment to present post: 23 Sept. 1952

2. Description of duties since last efficiency report. (Use most recent first. Describe concisely but fully)

**Deputy Chief of Station**

3. If courses of instruction were completed during period of this report, list title, location of school, length of course and date completed.

**Courses while on TDY in U.S.**

| Proficiency in Foreign language   | READING |      |      | SPEAKING |      |      | UNDERSTANDING |      |      |
|---|---------|------|------|----------|------|------|---------------|------|------|
|   | EXC     | GOOD | FAIR | EXC      | GOOD | FAIR | EXC           | GOOD | FAIR |
| <span style="border: 1px solid black; display: inline-block; width: 80px; height: 1.2em;"></span> |         |      | x    |          |      | z    |               |      | x    |
|   |         |      |      |          |      |      |               |      |      |
|   |         |      |      |          |      |      |               |      |      |

4. My preference for next duty after termination of current assignment is:

TYPING UNIT

IDEALIA

Same

Same

(list one or more in order of preference)

5. Have there been any changes in personal status since original employment or last report - whichever is later? (Answer yes or no.)  
 Marital Status No Number of Dependents 1 Emergency addresses No  
 legal address No If the answer to any of the above is yes, attach a separate detailed report to duplicate hereto. In the case of marriage, the report will include names, addresses, and citizenship of spouse, father-in-law, mother-in-law, brothers-in-law, and sisters-in-law.

DATE 1 June 1953

\* Child born 11 Feb. 1953

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1. This report through it to be completed by \_\_\_\_\_  
 Date received by this report: 27 Sept. 1952 1 June 1953  
 Proposed for report: Annual  Special  Reassignment of reporting officer   
 Proposed Reassignment of employee reported on: \_\_\_\_\_; Covering initial \_\_\_\_\_ days  
 of employment: \_\_\_\_\_

2. Is this employee qualified to perform all present duties? Yes  No   
 Is employee better qualified for other duties? Yes  No   
 If so, what duty or duties? \_\_\_\_\_

Do you concur in employee's description of duties under Section 2?  
 Yes  No  If NO, explain in Section 11.  
 Has employee worked for professional improvement? Yes  No   
 Do you recommend employee for promotion? Yes  No   
 If so, to what grade and for what position?  
 To grade GS-15. However, there is no current vacancy in  T/O.

For each factor observed check the appropriate box to indicate how the employee compares with all others of the same classification whose professional abilities are known to you personally. Do not limit this comparison to the others now under your supervision. Do not hesitate to mark "Not Observed" on any quality when appropriate.

Rating Factors

|  | Not Observed | Fair | Good | Very Good                           | Excellent                           | Outstanding                         |
|--|--------------|------|------|-------------------------------------|-------------------------------------|-------------------------------------|
| A. Ability to work and get along with people     |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| B. Interest and enthusiasm in work               |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| C. Security consciousness                        |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| D. Ability to grasp instructions                 |              |      |      | <input checked="" type="checkbox"/> |                                     |                                     |
| E. Ability to follow instructions                |              |      |      |                                     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| F. Ability to obtain results and get things done |              |      |      |                                     |                                     | <input checked="" type="checkbox"/> |
| G. Initiative                                    |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| H. Ability to handle and direct                  |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| I. Dependence on present duties                  |              |      |      |                                     |                                     | <input checked="" type="checkbox"/> |
| J. Ability to evaluate intelligently             |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| K. Information                                   |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| L. Accuracy                                      |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| M. Capacity (Non-Gullibility)                    |              |      |      | <input checked="" type="checkbox"/> |                                     |                                     |
| N. Leadership                                    |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |
| O. Physical Stamina                              |              |      |      | <input checked="" type="checkbox"/> |                                     |                                     |
| Q. Mental Stamina                                |              |      |      |                                     | <input checked="" type="checkbox"/> |                                     |

10. Indicate your attitude toward having this employee under your command or supervision should you: Definitely not want him  Not to have him  Satisfied to have him  Definitely desire him

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11. Enter here any desired remarks pertaining to particular qualifications or lack thereof which are considered pertinent to the evaluation of this employee. Outstanding assets and/or serious limitations should be stated, also reasons for and recommendations as to reassignment will be given if appropriate to this report.

Subject officer is an outstanding addition to KUBARK as a general service staff officer. He has the aggressive sense of urgency so necessary in any position of responsibility together with the necessary qualities of balance, understanding of human nature and sincerity of purpose. He would be an asset to any branch, division or staff of KUBARK home office, and would be capable of assuming almost any responsible position in an overseas post. If he has any weakness at present, it is a lack of experience in covert operations; this can be overcome before the expiration of his present tour.

(If additional space is needed, attach extra sheet.)

17 August 1953

(Date)

(If Reviewing Officer or Chief of Station does not concur with this report, exceptions will be stated in space provided below.)

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE SHOWN TO THE  
EMPLOYEE REPORTED ON

BIASED OPINIONS BASED ON PERSONAL LIKING AND DISLIKES MUST BE SCRUPULOUSLY AVOIDED. IT SHOULD BE BORNE IN MIND THAT THE PREPARATION OF EFFICIENCY REPORTS IS AN IMPORTANT FUNCTION OF ALL SUPERVISORS OF EMPLOYEES, AND THE ACCURATE AND TRUE EVALUATIONS EXPRESSED THEREIN ARE A DIRECT REFLECTION UPON HIS OWN ABILITY AND QUALIFICATION FOR THE POSITION HE HOLDS.

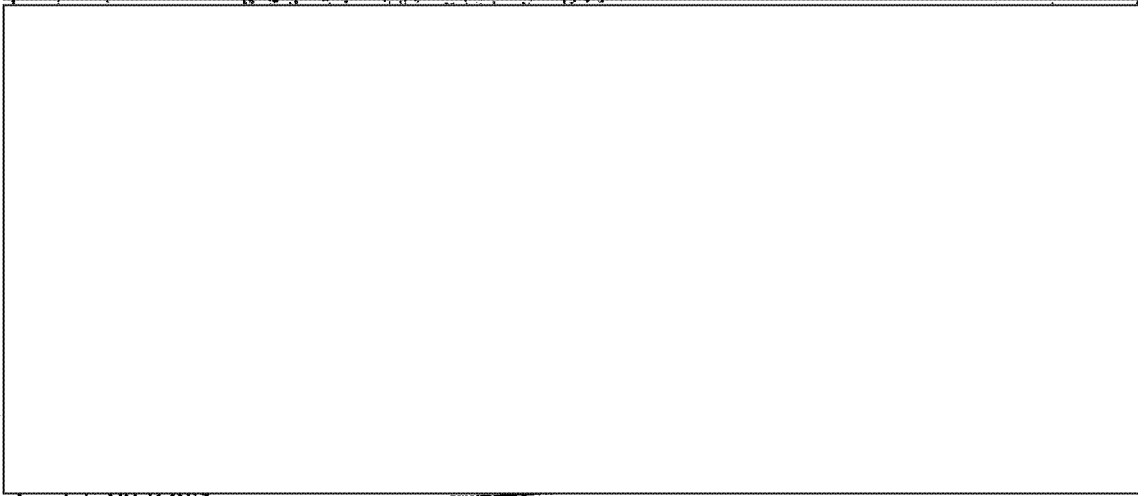
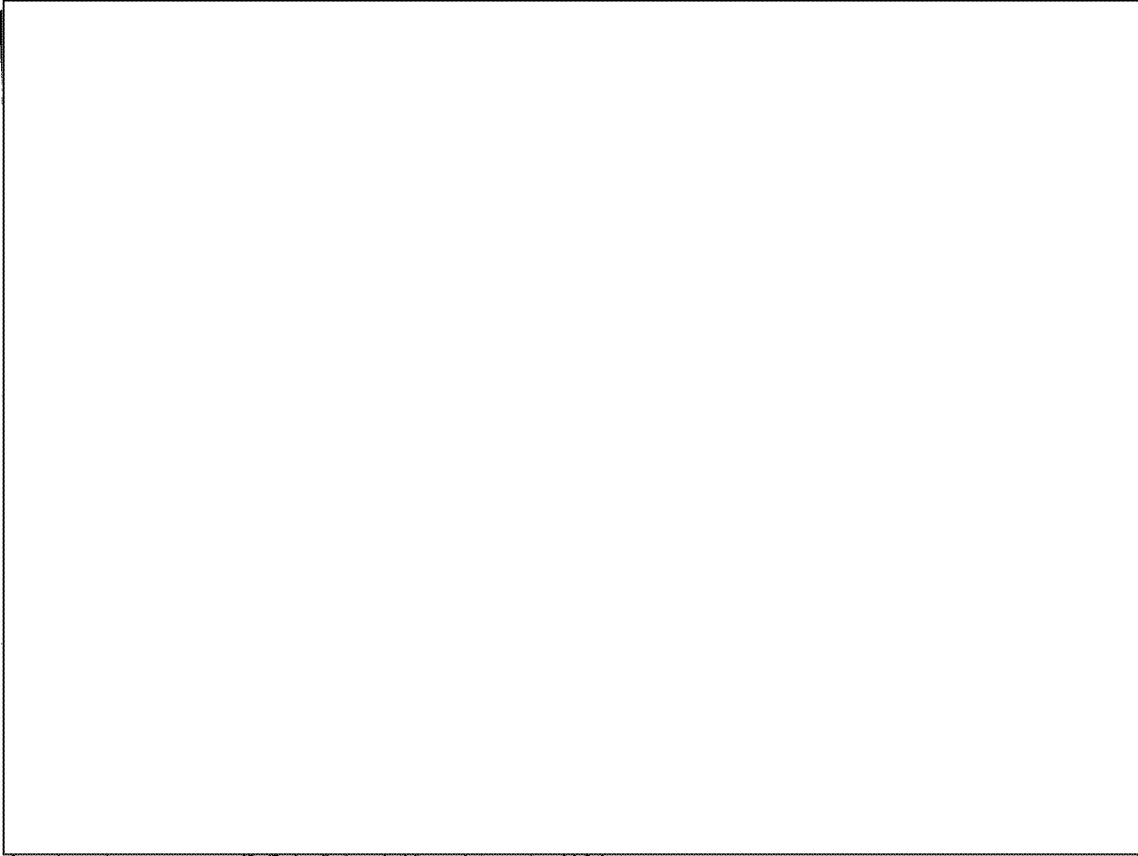
ANY DESIRED REMARKS OF REVIEWING OFFICER AND/OR CHIEF OF STATION:

**CONFIDENTIAL**

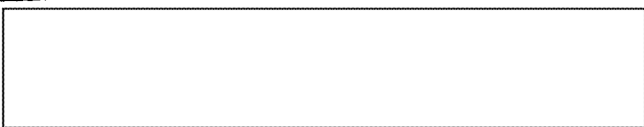
11-31-18

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FILE NO.



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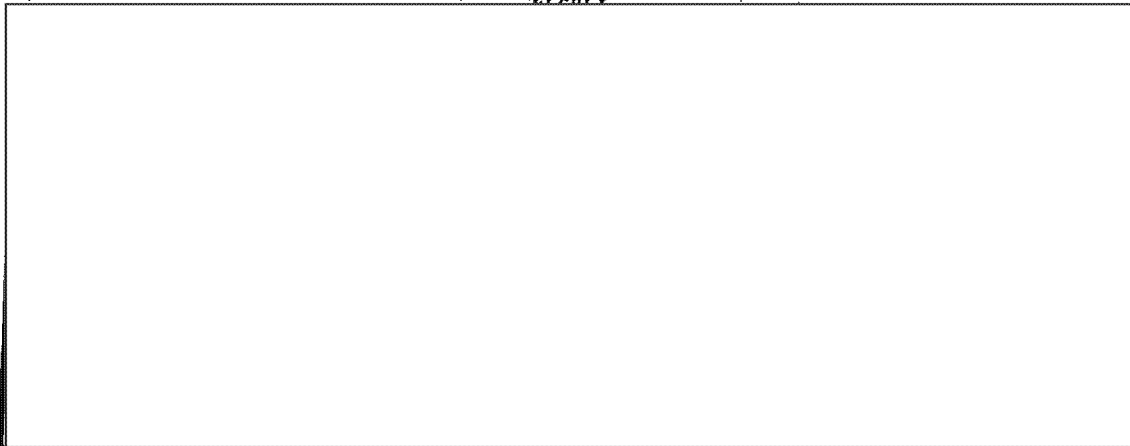
FORM 1551 use previous edition

SECRET

ES, IMPDET CL OF 007422

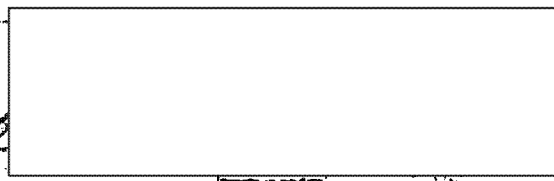


SECRET



Handwritten text and a stamp, possibly a date, located below the middle redaction.

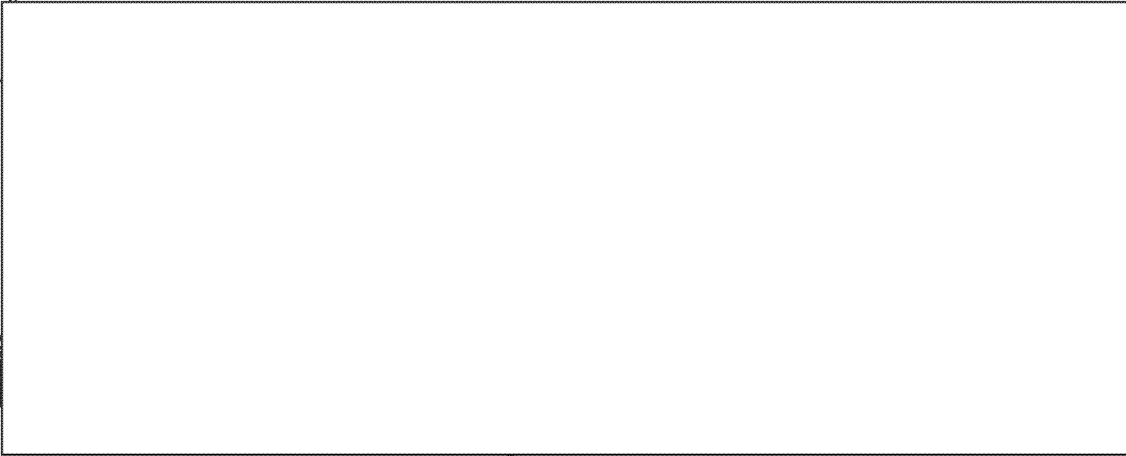
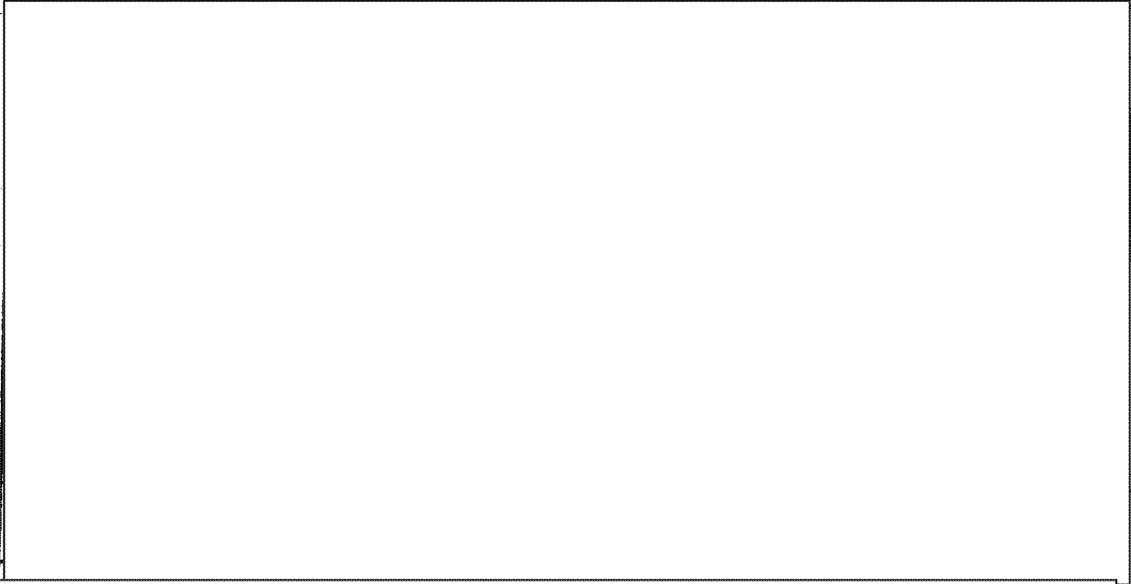
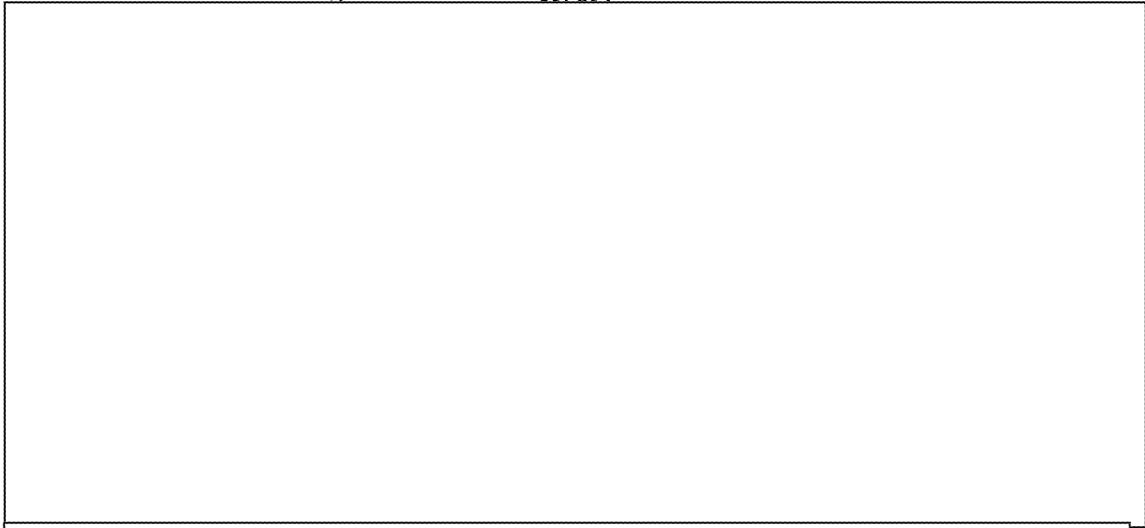
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COPY 5 - OP  
COPY 6 - SEC - FILE



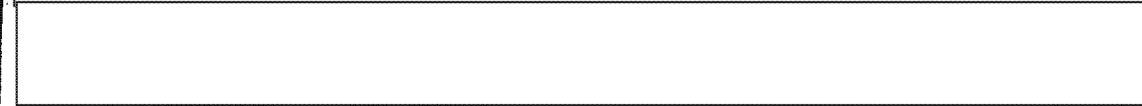
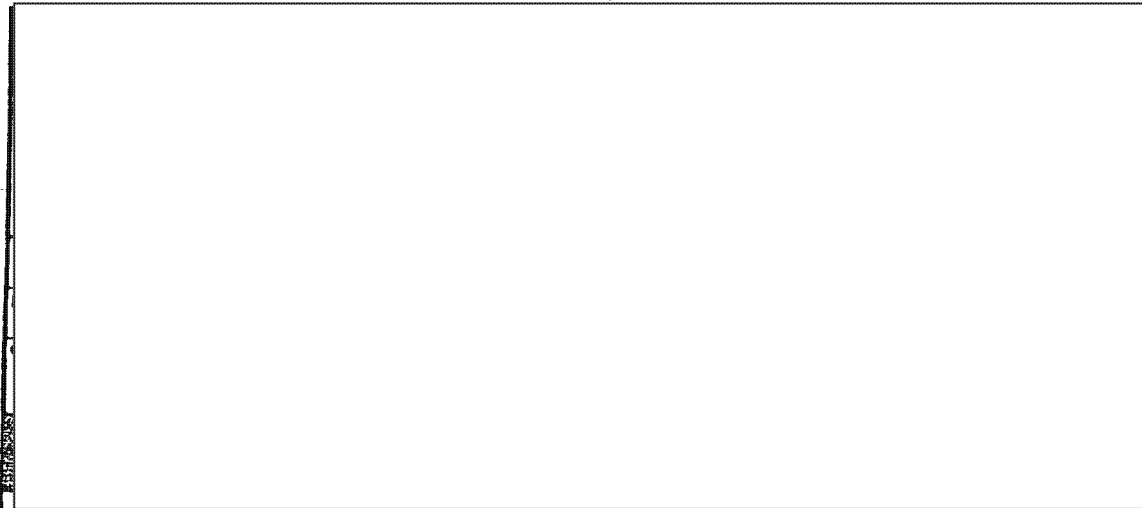
1551

FORM 8-63

SECRET



SECRET



a. Temporarily for \_\_\_\_\_ days, effective \_\_\_\_\_

b. Continuing, effective: \_\_\_\_\_ POD

Submit Form 642 to change limitation category.  
(HR 20-7)

Ascertain that Army W-2 being issued.  
(HR 20-662-1)

Submit Form 1322 for any change affecting this cover.  
(R 240-250)

Submit Form 1323 for transferring cover responsibility.  
(R 240-250)

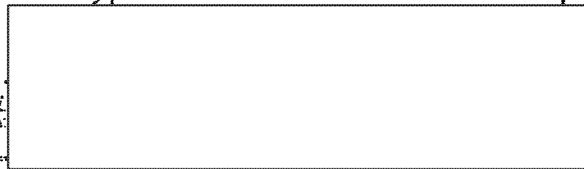
THIS AREA REMAINS  
ON TOP OF FILE

Concluded in issuance

AGE  
NACS

Hospitalization card.

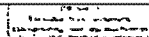
Cover History



62/194  
Form 1-250 Form 2-Continuing Component, 3  
Form 4-642 W-2 Form 5-File

301

SECRET



4 277-10-011

DNSS 2 JAN 74

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

*Donohue/P: B*

01P

1 SERIAL NUMBER  
2 NAME (LAST, FIRST, MIDDLE)

3 NATURE OF PERSONNEL ACTION  
RETIREMENT (VOLUNTARY) UNDER CIA  
RETIREMENT AND DISABILITY SYSTEM

4 EFFECTIVE DATE  
MO DA YR  
12 31 73

5 CATEGORY OF EMPLOYMENT  
REGULAR

6 FUNDS  
Y TO V  
CF TO V  
Y TO CF  
CF TO CF

7 FAN AND NSCA  
4221 0117 0000

8 CSC OR OTHER LEGAL AUTHORITY  
PL 88-643 SECT 233

9 ORGANIZATIONAL DESIGNATIONS  
DDO/PLANS STAFF  
CAREER MANAGEMENT GROUP

10 LOCATION OF OFFICIAL STATION  
WASH., D.C.

12 POSITION NUMBER  
0040

11 SERVICE DESIGNATION  
D

OCCUPATIONAL SERIES  
36.01

16 GRADE AND STEP  
17 5

17 SALARY OF RATE  
36000

-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK  
ECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF

FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

18 STATION CODE  
19 OFFICE CODE  
20 PAYMENT CODE  
21 DATE OF BIRTH  
22 DATE OF GRADE  
23 DATE OF LEI  
24 DATA  
25 SEPARATION DATA  
26 DATA  
27 SOCIAL SECURITY NO

EOD DATA

28 VET PREFERENCE  
29 SERV COMP DATA  
30 UNDO COMP DATA  
31 CAREER CATEGORY  
32 FEDERAL TAX DATA  
33 FEDERAL TAX DATA  
34 STATE TAX DATA  
35 SIGNATURE OR OTHER AUTHENTICATION

POSTED  
1-3-74  
JER

15

~~10/31~~ H-31

8888

|   |      |          |               |                   |      |          |                |               |     |
|---|------|----------|---------------|-------------------|------|----------|----------------|---------------|-----|
| 1 SERIAL NO   |      | 2 NAME   |               | 3 ORGANIZATION    |      | 4 FUNDS  |                | 5 LWOP HOURS  |     |
|   |      |          |               | 37 133            |      | V        |                |               |     |
| 6 OLD SALARY RATE   |      |          |               | 7 NEW SALARY RATE |      |          |                | 8 TYPE ACTION |     |
| Grade   | Step | Salary   | Last Eff Date | Grade             | Step | Salary   | EFFECTIVE DATE | SI            | ADJ |
| GS 17   | 4    | \$36,600 | 11/28/71      | GS 17             | 5    | \$36,600 | 11/25/73       |               |     |
| CERTIFICATION AND AUTHENTICATION  |      |          |               |                   |      |          |                |               |     |
| I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPLIANCE.   |      |          |               |                   |      |          |                |               |     |
| SIGNATURE   |      |          |               | DATE              |      |          |                |               |     |
|   |      |          |               | 2 Oct 73          |      |          |                |               |     |
| <input checked="" type="checkbox"/> NO EXCESS LWOP<br><input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD |      |          |               |                   |      |          |                |               |     |
| SUPERVISOR'S INITIALS   |      |          |               |                   |      |          |                |               |     |
| Ray   |      |          |               |                   |      |          |                |               |     |
| PAY CHANGE NOTIFICATION   |      |          |               |                   |      |          |                |               |     |
| (4-51)  |      |          |               |                   |      |          |                |               |     |

DMSC 2 JAN 74

| 1. SERIAL NUMBER   |  | 2. NAME (LAST, FIRST, MIDDLE)   |  | 3. EFFECTIVE DATE                |  | 4. CATEGORY OF EMPLOYMENT       |  |
|--|--|---|--|----------------------------------|--|---------------------------------|--|
|  |  |   |  | 12 31 73                         |  | REGULAR                         |  |
| 5. RETIREMENT (VOLUNTARY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM   |  |   |  | 7. PAY AND NSCA                  |  | 8. CSC OR OTHER LEGAL AUTHORITY |  |
| FUNDS <input checked="" type="checkbox"/> V TO V<br><input type="checkbox"/> CF TO V   |  | <input type="checkbox"/> V TO CF<br><input type="checkbox"/> CF TO CF |  | 4221 0117 0000                   |  | PL 88-643 SRCT 233              |  |
| 9. ORGANIZATIONAL DESIGNATIONS   |  |   |  | 10. LOCATION OF OFFICIAL STATION |  |                                 |  |
|  |  |   |  |                                  |  |                                 |  |
| 11. POSITION TITLE   |  |   |  | 12. POSITION NUMBER              |  | 13. SERVICE DESIGNATION         |  |
| OPS OFFICER CH   |  |   |  | 0043                             |  | D                               |  |
| 14. CLASSIFICATION SCHEDULE (GS, IS, etc.)   |  | 15. OCCUPATIONAL SERIES   |  | 16. GRADE AND STEP               |  | 17. SALARY OR RATE              |  |
| GS   |  | 0136.01   |  | 17 5                             |  | 36000                           |  |
| 18. REMARKS<br>"IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED." |  |   |  |                                  |  |                                 |  |
| SIGNATURE OF OTHER AUTHENTICATOR   |  |   |  |                                  |  |                                 |  |
|  |  |   |  |                                  |  |                                 |  |

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739, PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 OCTOBER 1973

| NAME | SERIAL | ORGN. | FUNDS | GR-STEP   | NEW SALARY |
|------|--------|-------|-------|-----------|------------|
|      |        | 37    | 325   | V GS 17 4 | \$36,000   |

KHN: 12 OCT 73

SECRET  
(When Filled In)


| NOTIFICATION OF PERSONNEL ACTION   |                |                            |                        |                    |                                 |                          |                   |                                  |                   |  |
|--|----------------|----------------------------|------------------------|--------------------|---------------------------------|--------------------------|-------------------|----------------------------------|-------------------|--|
| 1 SERIAL NUMBER  |                | 2 NAME (LAST FIRST MIDDLE) |                        |                    |                                 |                          |                   |                                  |                   |  |
| 3 NATURE OF PERSONNEL ACTION   |                |                            |                        | 4 EFFECTIVE DATE   |                                 | 5 CATEGORY OF EMPLOYMENT |                   |                                  |                   |  |
| REASSIGNMENT   |                |                            |                        | 09 21 73           |                                 | REGULAR                  |                   |                                  |                   |  |
| 6 FUNDS  |                | X V TO V                   |                        | V TO CF            |                                 | 7 FAN AND NSCA           |                   | 8 CSC OR OTHER LEGAL AUTHORITY   |                   |  |
| CF TO V  |                | CF TO CF                   |                        | 4221 0117 0000     |                                 | 50 USC 403 J             |                   |                                  |                   |  |
| 9 ORGANIZATIONAL DESIGNATIONS  |                |                            |                        |                    | 10 LOCATION OF OFFICIAL STATION |                          |                   |                                  |                   |  |
| DDO/PLANS STAFF<br>CAREER MANAGEMENT GROUP   |                |                            |                        |                    | WASH., D.C.                     |                          |                   |                                  |                   |  |
| 11 POSITION-TITLE  |                |                            |                        | 12 POSITION NUMBER |                                 | 13 SERVICE DESIGNATION   |                   |                                  |                   |  |
| OPS OFFICER CH.  |                |                            |                        | 0049               |                                 | D                        |                   |                                  |                   |  |
| 14 CLASSIFICATION SCHEDULE (GS, LB, etc.)  |                |                            | 15 OCCUPATIONAL SERIES |                    | 16 GRADE AND STEP               |                          | 17 SALARY OR RATE |                                  |                   |  |
| GS   |                |                            | 0136.01                |                    | 17 4                            |                          | 36000             |                                  |                   |  |
| <p>"IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED."</p> |                |                            |                        |                    |                                 |                          |                   |                                  |                   |  |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |                |                            |                        |                    |                                 |                          |                   |                                  |                   |  |
| 19 ACTION CODE   | 20 EMPLOY CODE | 21 OFFICE CODING           |                        | 22 STATION CODE    | 23 INTEGRAL CODE                | 24 MONTH CODE            | 25 DATE OF BIRTH  | 26 DATE OF GRADE                 | 27 DATE OF REL    |  |
| 37   | 10             | 37325 PS                   |                        | 75013              |                                 |                          |                   |                                  |                   |  |
| 28 DATE EXPIRES  |                | 29 SPECIAL REFERENCE       |                        | 30 RETIREMENT DATA |                                 | 31 SEPARATION DATA CODE  |                   | 32 CORRECTION / CORRELATION DATA |                   |  |
|  |                |                            |                        |                    |                                 |                          |                   | 33 SECURITY REG NO               |                   |  |
| 35 NET PREFERENCE  |                | 36 SERV COMP DATE          |                        | 37 LONG COMP DATE  |                                 | 38 CAREER CATEGORY       |                   | 39 LEGAL / HEALTH INSURANCE      |                   |  |
|  |                |                            |                        |                    |                                 |                          |                   | 40 SOCIAL SECURITY NO            |                   |  |
| 41 PREVIOUS CIVILIAN GOVERNMENT SERVICE  |                |                            |                        | 42 LEAVE CAT. CODE |                                 | 43 FEDERAL TAX DATA      |                   |                                  | 44 STATE TAX DATA |  |
| 45 SIGNATURE OR OTHER AUTHENTICATION   |                |                            |                        |                    |                                 |                          |                   |                                  |                   |  |

POSTED  
MAY 1973



RCS: 30 JULY 73

SECRET  
(When Filled In)

| OCF NOTIFICATION OF PERSONNEL ACTION   |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
|--|-----------------|-----------------------------|-------------------------|---------------------|--------------------------|--|--------------------|---------------------------------|-------------------|-------------------------|------------------|
| 1. SERIAL NUMBER   |                 | 2. NAME (LAST FIRST MIDDLE) |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| 3. NATURE OF PERSONNEL ACTION  |                 |                             |                         | 4. EFFECTIVE DATE   |                          | 5. CATEGORY OF EMPLOYMENT  |                    |                                 |                   |                         |                  |
| REASSIGNMENT   |                 |                             |                         | 07   01   73        |                          | REGULAR  |                    |                                 |                   |                         |                  |
| 6. FUNDS   |                 | V TO V                      |                         | V TO CF             |                          | 7. FAN AND NSCA  |                    | 8. CSC OR OTHER LEGAL AUTHORITY |                   |                         |                  |
| X  |                 |                             |                         |                     |                          | 4221 0117 0000   |                    | 50 USC 403 J                    |                   |                         |                  |
| 9. ORGANIZATIONAL DESIGNATIONS   |                 |                             |                         |                     |                          | 10. LOCATION OF OFFICIAL STATION   |                    |                                 |                   |                         |                  |
| DDO/PLANS STAFF<br>CAREER MANAGEMENT GROUP<br>PENDING REASSIGNMENT   |                 |                             |                         |                     |                          | WASH., D.C.  |                    |                                 |                   |                         |                  |
| 11. POSITION TITLE   |                 |                             |                         |                     |                          | 12. POSITION NUMBER  |                    | 13. SERVICE DESIGNATION         |                   |                         |                  |
| OPS OFFICER CH   |                 |                             |                         |                     |                          | 0000   |                    | D                               |                   |                         |                  |
| 14. CLASSIFICATION SCHEDULE (GS, LB, PK)   |                 |                             | 15. OCCUPATIONAL SERIES |                     | 16. GRADE AND STEP       |  | 17. SALARY OR RATE |                                 |                   |                         |                  |
| GS   |                 |                             | 0136.01                 |                     | 17 4                     |  | 36000              |                                 |                   |                         |                  |
| 18. REMARKS  |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| " IN ACCORDANCE WITH HR 20-23A(2), AN EMPLOYEE WILL HOLD SUPERGRADE RANK FOR SUCH TIME AS THE DIRECTOR MAY DETERMINE, REGARDLESS OF THE NATURE OF THE DUTIES PERFORMED." |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| 19. ACTION CODE  | 20. EMPLOY CODE | 21. OFFICE CODING           |                         | 22. STATION CODE    | 23. INTEGRATE CODE       | 24. PUNTS CODE   | 25. DATE OF BIRTH  |                                 | 26. DATE OF GRADE |                         | 27. DATE OF LET. |
| 37   | 10              | 37135                       | PS                      | 75013               |                          | 1  |                    |                                 |                   |                         |                  |
| 28. NTE DATES  |                 | 29. SPECIAL REFERENCE       | 30. RETIREMENT DATA     |                     | 31. SEPARATION DATA CODE | 32. Correction / Cancellation Data   |                    | 33. SECURITY INFO               |                   | 34. SEC.                |                  |
|  |                 |                             |                         |                     |                          |  |                    | EOD DATA                        |                   |                         |                  |
| 35. VET PREFERENCE   |                 | 36. SERV. COMP. DATE        |                         | 37. LONG COMP. DATE |                          | 38. CAREER CATEGORY  |                    | 39. FEEDBACK HEALTH INSURANCE   |                   | 40. SOCIAL SECURITY NO. |                  |
|  |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE   |                 |                             |                         | 42. LEAVE CAT CODES |                          | 43. FEDERAL TAX DATA   |                    |                                 |                   | 44. STATE TAX DATA      |                  |
| 1. NO PREVIOUS SERVICE<br>2. NO BREAK IN SERVICE<br>3. BREAK IN SERVICE LESS THAN 3 YEARS<br>4. BREAK IN SERVICE MORE THAN 3 YEARS                                       |                 |                             |                         |                     |                          | 1. YES<br>2. NO  |                    |                                 |                   | 1. YES<br>2. NO         |                  |
| SIGNATURE OR OTHER AUTHENTICATION  |                 |                             |                         |                     |                          |  |                    |                                 |                   |                         |                  |
| FROM: NOCAD  |                 |                             |                         |                     |                          | <div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED<br/>           8-1-73<br/>  </div> |                    |                                 |                   |                         |                  |

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

| NAME | SERIAL | ORGN. | FUNDS | GR-STEP   | NEW SALARY |
|------|--------|-------|-------|-----------|------------|
|      |        | 54    | 997   | V GS 17 4 | \$36,000   |

BS: 21 MAR 72

SECRET  
(When Filled In)

| NOTIFICATION OF PERSONNEL ACTION                         |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
|--|-----------------|-----------------------------|-------------------------|---------------------|--|--------------------------------------|-------------------------|---------------------------------|-----------------|
| 1. SERIAL NUMBER   |                 | 2. NAME (LAST-FIRST-MIDDLE) |                         |                     |  |                                      |                         |                                 |                 |
| 3. NATURE OF PERSONNEL ACTION                            |                 | 4. EFFECTIVE DATE           |                         |                     | 5. CATEGORY OF EMPLOYMENT  |                                      |                         |                                 |                 |
| REASSIGNMENT   |                 | 03 03 72                    |                         |                     | REGULAR  |                                      |                         |                                 |                 |
| 6. FUNDS   |                 | V TO V                      |                         | V TO CF             |  | 7. Financial Analysis No. Chargeable |                         | 8. CSC OR OTHER LEGAL AUTHORITY |                 |
| X  |                 | CF TO V                     |                         | CF TO CF            |  | 2231 4148 0000                       |                         | 50 USC 403 J                    |                 |
| 9. ORGANIZATIONAL DESIGNATIONS                           |                 |                             |                         |                     | 10. LOCATION OF OFFICIAL STATION   |                                      |                         |                                 |                 |
| DDP/<br>DEVELOPMENT COMPLEMENT                           |                 |                             |                         |                     | WASH., D.C.  |                                      |                         |                                 |                 |
| 11. POSITION TITLE                                       |                 |                             |                         |                     | 12. POSITION NUMBER  |                                      | 13. SERVICE DESIGNATION |                                 |                 |
| OPS OFFICER CH   |                 |                             |                         |                     | 9997   |                                      | D                       |                                 |                 |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)               |                 |                             | 15. OCCUPATIONAL SERIES |                     | 16. GRADE AND STEP   |                                      | 17. SALARY OR RATE      |                                 |                 |
| GS   |                 |                             | 0136.01                 |                     | 17 4   |                                      | 36000                   |                                 |                 |
| 18. REMARKS<br>OTHER                                     |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
| 19. ACTION CODE  | 20. EMPLOY CODE | 21. OFFICE CODING NUMBER    |                         | 22. STATION CODE    | 23. RESERVE CODE   | 24. HONORARY CODE                    | 25. DATE OF BIRTH       | 26. DATE OF GRADE               | 27. DATE OF EIS |
| 37   | 18              | 54997 NOCA                  |                         | 75013               |  |                                      |                         |                                 |                 |
| 28. PAY EFFECTS  |                 | 29. SPECIAL REFERENCE       | 30. RETIREMENT DATA     |                     | 31. REPARATIONS DATA CODE  | 32. COMPENSATION COLLECTION DATA     |                         | 33. SECURITY REG. NO.           | 34. SEA         |
|  |                 |                             |                         |                     |  |                                      |                         | EOD DATA                        |                 |
| 35. VET PREFERENCE                                       |                 | 36. SERV. COMP. DATE        |                         | 37. LONG COMP. DATE |  | 38. CAREER CATEGORY                  |                         | 39. FEGLI HEALTH INSURANCE      |                 |
|  |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE                 |                 |                             |                         | 42. LEAVE CAT. CODE |  | 43. FEDERAL TAX DATA                 |                         | 44. STATE TAX DATA              |                 |
|  |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
| SIGNATURE OR OTHER AUTHENTICATION                        |                 |                             |                         |                     |  |                                      |                         |                                 |                 |
| FROM MPS   |                 |                             |                         |                     | <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="font-size: 24px; margin: 0;">POSTED</p> <p style="margin: 0;">3-22-72 1/1</p> </div> |                                      |                         |                                 |                 |

FORM 535 11-50 11/73 6-73

Use Previous Edition

SECRET

Obtained from electronic, micrographic and other information

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

| NAME | SERIAL | DRGN. | FUNDS | GR-STEP   | NEW SALARY |
|------|--------|-------|-------|-----------|------------|
|      |        | 52    | 100   | V GS 17 4 | \$36,000   |

BBG: 30 NOV 71

SECRET  
(When Filled In)

| NOTIFICATION OF PERSONNEL ACTION  |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
|---|-----------------|-------------------------------------|-------------------------|----------------------------------|--------------------|---------------------------|-------------------|-------------------------------------|-----------------|
| 1. SERIAL NUMBER  |                 | 2. NAME (LAST-FIRST-MIDDLE)         |                         |                                  |                    |                           |                   |                                     |                 |
| 3. NATURE OF PERSONNEL ACTION   |                 |                                     |                         | 4. EFFECTIVE DATE                |                    | 5. CATEGORY OF EMPLOYMENT |                   |                                     |                 |
| PROMOTION   |                 |                                     |                         | 11 28 71                         |                    | REGULAR                   |                   |                                     |                 |
| 6. FUNDS  |                 | 7. Financial Analyst No. Chargeable |                         | 8. CSC OR OTHER LEGAL AUTHORITY  |                    |                           |                   |                                     |                 |
| X V TO V  |                 | 2221 2886 (XX)0                     |                         | 50 USC 403 J                     |                    |                           |                   |                                     |                 |
| CF TO V   |                 | CF TO CF                            |                         |                                  |                    |                           |                   |                                     |                 |
| 9. ORGANIZATIONAL DESIGNATIONS  |                 |                                     |                         | 10. LOCATION OF OFFICIAL STATION |                    |                           |                   |                                     |                 |
| DDP/MISSIONS & PROGRAMS STAFF<br>OFFICE OF THE CHIEF  |                 |                                     |                         | WASH., D.C.                      |                    |                           |                   |                                     |                 |
| 11. POSITION TITLE  |                 |                                     |                         | 12. POSITION NUMBER              |                    | 13. SERVICE DESIGNATION   |                   |                                     |                 |
| OPS OFFICER CH  |                 |                                     |                         | 0001                             |                    | D                         |                   |                                     |                 |
| 14. CLASSIFICATION SCHEDULE (OS, LB, etc.)  |                 |                                     | 15. OCCUPATIONAL SERIES |                                  | 16. GRADE AND STEP |                           | 17. SALARY GRADE  |                                     |                 |
| GS  |                 |                                     | 0136.01                 |                                  | 17 4               |                           | 35801             |                                     |                 |
| 18. REMARKS   |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL  |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
| 19. ACTION CODE   | 20. EMPLOY CODE | 21. OFFICE CODING                   |                         | 22. STATION CODE                 | 23. REGULAR CODE   | 24. EMPLOY CODE           | 25. DATE OF BIRTH | 26. DATE OF GRADE                   | 27. DATE OF SER |
| 22  | 10              | 52100                               | MPS                     | 75013                            |                    | 1                         |                   | 11 28 71                            | 11 28 71        |
| 28. DATE EMPLOYED   |                 | 29. SPECIAL REFERENCE               |                         | 30. RETIREMENT DATA              |                    | 31. SEPARATION DATA CODE  |                   | 32. CONTINUATION CIRCUMSTANCES FROM |                 |
|   |                 |                                     |                         |                                  |                    |                           |                   | EOD DATA                            |                 |
| 33. VET. PREFERENCE   |                 | 34. SERV. COMP. DATE                |                         | 35. LONG. COMP. DATE             |                    | 36. CAREER CATEGORY       |                   | 37. LEGAL HEALTH INSURANCE          |                 |
|   |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
| 38. PREVIOUS CIVILIAN GOVERNMENT SERVICE  |                 |                                     |                         | 39. LEAVE CAT. CODE              |                    | 40. FEDERAL TAX DATA      |                   | 41. STATE TAX DATA                  |                 |
|   |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
| SIGNATURE OR OTHER AUTHENTICATION   |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |
| <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;"><b>POSTED</b></p> <p style="margin: 0;">7 DEC 1971</p> </div> |                 |                                     |                         |                                  |                    |                           |                   |                                     |                 |

FORM 1150-344  
MAY 6-70

Use Previous Edition

SECRET

12-71  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

31

H 36

|  |      |                       |                |                         |      |          |                |                |      |
|--|------|-----------------------|----------------|-------------------------|------|----------|----------------|----------------|------|
| 1. SERIAL NO.  |      | 2. NAME               |                | 3. ORGANIZATION         |      | 4. FUND  |                | 5. LWOP HOURS  |      |
|  |      |                       |                | 32 100                  |      | V        |                |                |      |
| 6. OLD SALARY RATE   |      |                       |                | 7. NEW SALARY RATE      |      |          |                | 8. TYPE ACTION |      |
| Grade  | Step | Salary                | Last Eff. Date | Grade                   | Step | Salary   | EFFECTIVE DATE | SI             | ADJ. |
| GS 16  | 6    | \$32,819              | 08/24/69       | GS 16                   | 7    | \$33,757 | 08/22/71       |                |      |
| CERTIFICATION AND AUTHENTICATION   |      |                       |                |                         |      |          |                |                |      |
| I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.  |      |                       |                |                         |      |          |                |                |      |
| SIGNATURE  |      |                       |                |                         |      | DATE     |                |                |      |
| <i>Carol M. ...</i>  |      |                       |                |                         |      | 11/15/71 |                |                |      |
| <input checked="" type="checkbox"/> NO EXCESS LWOP<br><input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD |      |                       |                |                         |      |          |                |                |      |
| WITHIN GRADE PAY SUSPENDED UNTIL 14 NOV 71<br>EFFECTIVE DATE RETAINED<br>DATE OF LAST EQUIVALENT INCREASE  |      |                       |                |                         |      |          |                |                |      |
| CLERKS INITIALS  |      |                       |                | AUDITED BY              |      |          |                |                |      |
| BEK  |      |                       |                | <i>[Signature]</i>      |      |          |                |                |      |
| FORM 7-68 560 E  |      | Use previous editions |                | PAY CHANGE NOTIFICATION |      |          |                | (4-51)         |      |

AUG 15 15 17 71

RECEIVED

824

SECRET  
(When Filled In)

DDP: 12 MAR 71

NOTIFICATION OF PERSONNEL ACTION

OCF

|  |  |  |                               |
|--|--|--|-------------------------------|
| 1. SERIAL NUMBER   |  | 2. NAME (LAST FIRST MIDDLE)                            |                               |
| 3. NATURE OF PERSONNEL ACTION<br>REASSIGNMENT AND TRANSFER TO<br>VOUCHERED FUNDS.        |  |  |                               |
| 4. EFFECTIVE DATE<br>MO DA YR<br>03   21   71  |  | 5. CATEGORY OF EMPLOYMENT<br>REGULAR                   |                               |
| 6. FUNDS<br>K  |  | 7. Financial Analysis No. Chargeable<br>1221 2800 0000 |                               |
| 8. V TO V<br>CF TO V   |  | 8. CSC OR OTHER LEGAL AUTHORITY<br>50 USC 403 J        |                               |
| 9. ORGANIZATIONAL DESIGNATIONS<br>DDP/MISSIONS AND PROGRAMS STAFF<br>OFFICE OF THE CHIEF |  | 10. LOCATION OF OFFICIAL STATION<br>WASH., D.C.        |                               |
| 11. POSITION TITLE<br>OPS OFFICER CH   |  | 12. POSITION NUMBER<br>0001                            | 13. SERVICE DESIGNATION<br>D. |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)<br>GS   |  | 15. OCCUPATIONAL SERIES<br>0130.01                     | 16. GRADE AND STEP<br>16 6    |
| 17. SALARY OR RATE<br>32819  |  | 18. REMARKS  |                               |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |                        |                        |                          |                                       |                    |                         |                       |                         |
|--|------------------------|------------------------|--------------------------|---------------------------------------|--------------------|-------------------------|-----------------------|-------------------------|
| 19. ACTION CODE                          | 20. EMPLOY CODE        | 21. OFFICE COORDINATOR | 22. REPORTING CODE       | 23. PERSONNEL CODE                    | 24. EMPLOY CODE    | 25. DATE OF BIRTH       | 26. DATE OF GRADE     | 27. DATE OF SER.        |
| 15                                       | 10                     | 62100                  | MPS                      | 75113                                 |                    |                         |                       |                         |
| 28. RATE CAPSULE                         | 29. SPECIAL PREFERENCE | 30. RETIREMENT DATA    | 31. SEPARATION DATA CODE | 32. Correction of Classification Data | EOD DATA           |                         | 33. SECURITY REG. TAG | 34. SOCIAL SECURITY NO. |
|  |                        |                        |                          |                                       |                    |                         |                       |                         |
| 35. SEL. PREFERENCE                      | 36. SEPA COMP. DATE    | 37. ISOPAS COMP. DATE  | 38. CAREER CATEGORY      | 39. FEDERAL HEALTH INSURANCE          |                    | 40. SOCIAL SECURITY NO. |                       |                         |
|  |                        |                        |                          |                                       |                    |                         |                       |                         |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE |                        | 42. DEPT. CAT. (SOC)   | 43. FEDERAL TAX DATA     |                                       | 44. STATE TAX DATA |                         |                       |                         |
|  |                        |                        |                          |                                       |                    |                         |                       |                         |

SIGNATURE OR OTHER AUTHENTICATION

LOSTED  
MAR 3 1971

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME [REDACTED] SERIAL ORGN. FUNDS GR-STEP NEW SALARY  
 [REDACTED] 52 150 CF GS 16 6 \$32,819

36 H

CONFIDENTIAL

AUG 16 10 55 AM '69

|   |      |                  |                |                    |      |                  |                |                |      |
|---|------|------------------|----------------|--------------------|------|------------------|----------------|----------------|------|
| 1. SERIAL NO.   |      | 2. NAME          |                | 3. ORGANIZATION    |      | 4. FUNDS         |                | 5. LWOP HOURS  |      |
|   |      |                  |                | 52 150             |      | CF               |                |                |      |
| 6. OLD SALARY RATE  |      |                  |                | 7. NEW SALARY RATE |      |                  |                | 8. TYPE ACTION |      |
| Grade   | Step | Salary           | Last Eff. Date | Grade              | Step | Salary           | EFFECTIVE DATE | SI             | ADJ. |
| GS 16   | 5    | 225,873<br>28384 | 08/27/67       | GS 16              | 6    | 326,640<br>29219 | 08/24/69       |                |      |
| CERTIFICATION AND AUTHENTICATION  |      |                  |                |                    |      |                  |                |                |      |
| I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.   |      |                  |                |                    |      |                  |                |                |      |
| SIGNATURE   |      |                  |                | [REDACTED]         |      | DATE             |                | 3 June 1969    |      |
| <input checked="" type="checkbox"/> NO EXCESS LWOP<br><input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD |      |                  |                |                    |      |                  |                |                |      |
| CLERKS INITIALS   |      |                  |                | [REDACTED]         |      |                  |                |                |      |
| FORM 560 E Use previous editions PAY CHANGE NOTIFICATION (4-51)   |      |                  |                |                    |      |                  |                |                |      |

DB

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11476 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME [REDACTED] SERIAL ORGN. FUNDS GR-STEP NEW SALARY  
 [REDACTED] 52 150 CF GS 16 5 \$28,384



"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962".

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

| NAME | SERIAL | ORGN. | FUNDS | GR-STEP    | OLD SALARY | NEW SALARY |
|------|--------|-------|-------|------------|------------|------------|
|      |        | 52    | 150   | CF GS 10 5 | \$23,778   | \$25,879   |

SECRET  
(When Filled In)

JLB: 12 JUN 58

| NOTIFICATION OF PERSONNEL ACTION                         |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |
|--|-----------------|--------------------------------------|-------------------------|---------------------------------|----------------------------------|--------------------------|-------------------------|----------------------------------|-----------------|
| 1. SERIAL NUMBER   |                 | 2. NAME (LAST FIRST MIDDLE)          |                         |                                 |                                  |                          |                         |                                  |                 |
| 3. NATURE OF PERSONNEL ACTION                            |                 | 4. EFFECTIVE DATE                    |                         |                                 | 5. CATEGORY OF EMPLOYMENT        |                          |                         |                                  |                 |
| REASSIGNMENT   |                 | 06   12   58                         |                         |                                 | REGULAR                          |                          |                         |                                  |                 |
| 6. FUNDS   |                 | 7. Financial Analysis No. Chargeable |                         | 8. CSC OR OTHER LEGAL AUTHORITY |                                  |                          |                         |                                  |                 |
| V TO V   |                 | V TO CF                              |                         | 8121 2857 0000 50 USC 403 J     |                                  |                          |                         |                                  |                 |
| CF TO V  |                 | X                                    |                         | CF TO CF                        |                                  |                          |                         |                                  |                 |
| 9. ORGANIZATIONAL DESIGNATIONS                           |                 |                                      |                         |                                 | 10. LOCATION OF OFFICIAL STATION |                          |                         |                                  |                 |
| DDP/MISSIONS AND PROGRAMS STAFF PROGRAMS GROUP           |                 |                                      |                         |                                 | WASH., D.C.                      |                          |                         |                                  |                 |
| 11. POSITION TITLE                                       |                 |                                      |                         |                                 | 12. POSITION NUMBER              |                          | 13. SERVICE DESIGNATION |                                  |                 |
| DES OFFICER  |                 |                                      |                         |                                 | 0008                             |                          | D                       |                                  |                 |
| 14. CLASSIFICATION SCHEDULE (GS, BR, etc.)               |                 |                                      | 15. OCCUPATIONAL SERIES |                                 | 16. GRADE AND STEP               |                          | 17. SALARY OR RATE      |                                  |                 |
| GS   |                 |                                      | 0136.01                 |                                 | 16 5                             |                          | 23778                   |                                  |                 |
| 18. REMARKS  |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |
| 19. ACTION CODE  | 20. EMPLOY CODE | 21. OFFICE CODING                    |                         | 22. STATION CODE                | 23. INTERVIEW CODE               | 24. PHOTOCOPY CODE       | 25. DATE OF BIRTH       | 26. DATE OF GRADE                | 27. DATE OF LET |
| 37   | 10              | 32150                                | MPS                     | 75013                           |                                  |                          |                         |                                  |                 |
| 28. HIRE EMPLOY  |                 | 29. SERVICE REFERENCE                |                         | 30. RETIREMENT DATA             |                                  | 31. SEPARATION DATA CODE |                         | 32. CORRECTION/CONCILIATION DATA |                 |
| XX XX XX   |                 |                                      |                         |                                 |                                  |                          |                         | FOD DATA                         |                 |
| 33. VET. PREFERENCE                                      |                 | 34. SERV. COMP. DATE                 |                         | 35. LONG. COMP. DATE            |                                  | 36. CAREER CATEGORY      |                         | 37. REG. HEALTH INSURANCE        |                 |
| 1000   |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |
| 38. PREVIOUS CIVILIAN GOVERNMENT SERVICE                 |                 |                                      |                         | 39. LEAVE CAT. CODE             |                                  | 40. FEDERAL TAX DATA     |                         | 41. STATE TAX DATA               |                 |
| CODE   |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |
| SIGNATURE OR OTHER AUTHENTICATION                        |                 |                                      |                         |                                 |                                  |                          |                         |                                  |                 |

FROM O/PPD

**POSTED**

6-13-58

FILED IN

CLASSIFIED AND

DECLASSIFIED BY

DATE

OPM Form 1150-1  
May 1957

Use Previous Edition

SECRET



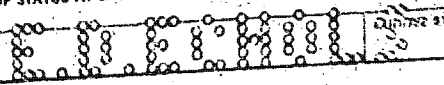
When Filled In

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206,  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

| NAME | SERIAL | ORGN. | FUNDS | GR-STEP    | OLD SALARY | NEW SALARY |
|------|--------|-------|-------|------------|------------|------------|
|      |        | 02    | 350   | CF GS 16 3 | \$22,755   | \$23,778   |

E-4

|   |      |          |                |   |          |               |                |
|---|------|----------|----------------|---|----------|---------------|----------------|
| 1. SERIAL NO.   |      | 2. NAME  |                | 3. ORGANIZATION   | 4. SINCE | 5. LWOP HOURS |                |
|   |      |          |                | 02 350  | CF       |               |                |
| 6. OLD SALARY RATE  |      |          |                | 7. NEW SALARY RATE  |          |               | 8. TYPE ACTION |
| Grade   | Step | Salary   | Last Eff. Date | Grade   | Step     | Salary        | EFFECTIVE DATE |
| GS 16   | 4    | \$22,085 | 08/29/65       | GS 16   | 5        | \$22,755      | 08/27/67       |
| CERTIFICATION AND AUTHENTICATION  |      |          |                |   |          |               |                |
| I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.   |      |          |                |   |          |               |                |
| SIGNATURE   |      |          |                |   |          | DATE          |                |
|   |      |          |                |   |          | June 1967     |                |
| <input type="checkbox"/> NO EXCESS LWOP<br><input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD |      |          |                |   |          |               |                |
| CLERK'S INITIALS  |      |          |                |  |          |               |                |
| FORM 560 E Use previous editions  |      |          |                |   |          |               |                |
| PAY CHANGE NOTIFICATION (4-51)  |      |          |                |   |          |               |                |

COMPENSATION TAX DIV

AUG 77

RS

UUUU

L 3

PJM: 15 AUG 66

SECRET  
CLASSIFIED

DAF NOTIFICATION OF PERSONNEL ACTION

|                  |                             |
|------------------|-----------------------------|
| 1. SERIAL NUMBER | 2. NAME (LAST FIRST-MIDDLE) |
|                  |                             |

|  |                               |                                      |
|--|-------------------------------|--------------------------------------|
| 3. NATURE OF PERSONNEL ACTION<br>EXCEPTED APPT<br>CAREER | 4. EFFECTIVE DATE<br>07 31 66 | 5. CATEGORY OF EMPLOYMENT<br>REGULAR |
|--|-------------------------------|--------------------------------------|

|          |         |          |  |   |
|----------|---------|----------|--|---|
| A. FUNDS | V TO V  | V TO CF  | 7. GSA CENTER NO. CHARGEABLE<br>7114 0001 0000 | 8. CSC OR OTHER LEGAL AUTHORITY<br>50 USC 403 J |
|          | CF TO V | CF TO CF |  |   |

|  |   |
|--|---|
| 9. ORGANIZATIONAL DESIGNATIONS<br>DCI/OFFICE OF PLANNING,<br>PROGRAMMING AND BUDGETING<br>PLANNING AND PROGRAMMING DIVISION<br>PROGRAM ANALYSIS BRANCH | 10. LOCATION OF OFFICIAL STATION<br>WASH., D.C. |
|--|---|

|                                       |                             |                                |
|---------------------------------------|-----------------------------|--------------------------------|
| 11. POSITION TITLE<br>IO PROGRAM EVAL | 12. POSITION NUMBER<br>0005 | 13. SERVICE DESIGNATION<br>-D- |
|---------------------------------------|-----------------------------|--------------------------------|

|  |                                    |                            |                             |
|--|------------------------------------|----------------------------|-----------------------------|
| 14. CLASSIFICATION SCHEDULE (GS, LS, etc.)<br>GS | 15. OCCUPATIONAL SERIES<br>0132.70 | 16. GRADE AND STEP<br>15 4 | 17. SALARY OR RATE<br>22025 |
|--|------------------------------------|----------------------------|-----------------------------|

|             |
|-------------|
| 18. REMARKS |
|             |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|   |                           |                      |                          |                               |                        |                     |
|---|---------------------------|----------------------|--------------------------|-------------------------------|------------------------|---------------------|
| 21. OFFICE CODING<br>ALPHABETIC<br>02350 OPPB | 22. STATION CODE<br>75013 | 23. OVERSEAS COST    | 24. HOURS                | 25. DATE OF BIRTH             | 26. DATE OF SEIZE      | 27. DATE OF LEI     |
| 28. OFF ADDRESS                               | 29. SPECIAL APPEAL        | 30. RETIREMENT DATA  | 31. SEPARATION DATA CODE | 32. CORRECTION/AMENDMENT DATA | EOD DATA               | 33. SECURITY REG NO |
| 34. EMP PREFERENCE                            | 35. SEV LEAF DATE         | 36. LEAF DATE        | 37. LEAF EXTENSION       | 38. FEELS/HEALTH INSURANCE    | 39. SOCIAL SECURITY NO |                     |
| 41. PREVIOUS GOVERNMENT SERVICE DATA          | 42. LEAVE (A)             | 43. FEDERAL EMP DATA | 44. STATE TAX DATA       | 45. FORMS                     | 46. CODE               |                     |

SIGNATURE OR OFFICE AUTHENTICATION

POSTED  
AUG 17 66

FORM 1000-100

Use Page Numbers Indicated

SECRET

When Filled In

(When Filled In)

FJH: 15 AUG 65

SECRET  
(When Filled In)

OEB

### NOTIFICATION OF PERSONNEL ACTION

|   |  |  |  |
|---|--|--|--|
| 1. SERIAL NUMBER  |  | 2. [Redacted]  |  |
| 3. NATURE OF PERSONNEL ACTION<br><b>RESIGNATION</b>           |  |  |  |
| 4. EFFECTIVE DATE<br>MO. DA. YR.<br><b>07 30 66</b>           |  | 5. CATEGORY OF EMPLOYMENT<br><b>REGULAR</b>            |  |
| 6. FUNDS<br>V TO V<br>CF TO V<br>X<br>CF TO CF                |  | 7. COST CENTER NO. CHARGEABLE<br><b>7123 0369 0000</b> |  |
| 8. ORGANIZATIONAL DESIGNATIONS<br><b>DDP/DOD<br/>US FIELD</b> |  | 9. LOCATION OF OFFICIAL STATION<br>[Redacted]          |  |
| 10. POSITION TITLE<br><b>CHIEF OF BASE</b>                    |  | 11. SERVICE DESIGNATION<br><b>02E1</b>                 |  |
| 12. CLASSIFICATION SCHEDULE (GS, LB, etc.)<br><b>GS</b>       |  | 13. OCCUPATIONAL SERIES<br><b>0136.08</b>              |  |
| 14. REMARKS   |  | 15. GRADE AND STEP<br><b>16 4</b>                      |  |
|   |  | 16. SALARY OR RATE<br><b>22085</b>                     |  |

#### SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |  |   |   |   |   |  |   |  |
|--|--|---|---|---|---|--|---|--|
| 19. ACTION CODE<br><b>45</b>                                       | 20. EMPLOYER CODE<br><b>10</b>                       | 21. OFFICE CODING<br>NUMBER: [Redacted]<br>ALPHABETIC: [Redacted] | 22. STATION CODE<br><b>6</b>                                | 23. INTEREST CODE   | 24. EMPLOY CODE   | 25. DATE OF BIRTH<br>MO. DA. YR.<br>[Redacted]   | 26. DATE OF GRADUATION<br>MO. DA. YR.<br>[Redacted] | 27. DATE OF LEAVE<br>MO. DA. YR.<br>[Redacted] |
| 28. DATE EXPIRES<br>MO. DA. YR.<br>[Redacted]                      | 29. SPECIAL REFERENCE<br>1. PFC<br>2. PFC<br>3. NONE | 30. RETIREMENT DATA<br>CODE<br><b>1500091</b>                     | 31. SEPARATION DATA CODE                                    | 32. CORRECTION/REINTEGRATION DATA<br>TYPE MO. DA. YR.<br>[Redacted] | 33. SECURITY<br>SEC. NO. [Redacted]                       |  | 34. SOCIAL SECURITY NO.                             |  |
| 35. VET. PREFERENCE<br>CODE<br>0 - NONE<br>1 - 5 PT.<br>2 - 10 PT. | 36. SERV. COMP. DATE<br>MO. DA. YR.<br>[Redacted]    | 37. LONG. COMP. DATE<br>MO. DA. YR.<br>[Redacted]                 | 38. CAREER CATEGORY<br>CODE<br>[Redacted]                   | 39. FEES / HEALTH INSURANCE<br>CODE<br>[Redacted]                   | 40. SOCIAL SECURITY US                                    | 41. PREVIOUS GOVERNMENT SERVICE DATA<br>CODE<br>0 - NO. PREVIOUS SERVICE<br>1 - NO. YEARS IN SERVICE<br>2 - YEARS IN SERVICE (LESS THAN 2 YEARS)<br>3 - YEARS IN SERVICE (MORE THAN 2 YEARS) |   |  |
| 42. SERVE CAT. CODE  |  |   | 43. FEDERAL EMP. DATA<br>FORMER EMPLOYER CODE<br>[Redacted] | 44. STATE EMP. DATA<br>FORMER EMPLOYER CODE<br>[Redacted]           | 45. STATE EMP. DATA<br>FORMER EMPLOYER CODE<br>[Redacted] |  |   |  |

EOD DATA

POSTED  
AUG 27 1966

| OLD SALARY RATE |      |          |                | NEW SALARY RATE |      |          |                | PAY ACTION |    |    |
|-----------------|------|----------|----------------|-----------------|------|----------|----------------|------------|----|----|
| Grade           | Step | Salary   | Effective Date | Grade           | Step | Salary   | Effective Date | PS         | LM | AD |
| GS 16           | 3    | \$20,245 | 08/30/64       | GS 16           | 4    | \$20,900 | 08/29/65       |            |    |    |

43 620 CF

Remarks and Authorization

- / / NO EXCESS LWOP
- / / IN PAY STATUS AT END OF WAITING PERIOD
- / / LWOP STATUS AT END OF WAITING PERIOD

CLERKS INITIALS \_\_\_\_\_ AUDITED BY \_\_\_\_\_

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: \_\_\_\_\_ DATE 15 June 65

POSTED  
 15 JUN 65  
 [Signature]

PAY CHANGE NOTIFICATION

(4-31)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME

SERIAL

ORGN. FUNDS GR-STEP OLD SALARY NEW SALARY  
 43 620 CF GS 16 4 321,653 322,085

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-501 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME

SERIAL

ORGN. FUNDS GR-STEP OLD SALARY NEW SALARY  
 43 620 CF GS 16 4 321,900 321,653

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

000

|                  |                             |
|------------------|-----------------------------|
| 1. SERIAL NUMBER | 2. NAME (LAST-FIRST-MIDDLE) |
|                  |                             |

|  |  |                                      |
|--|--|--------------------------------------|
| 3. NATURE OF PERSONNEL ACTION<br>DESIGNATION AS PARTICIPANT IN CIA<br>RETIREMENT AND DISABILITY SYSTEM | 4. EFFECTIVE DATE<br>NO. MO. YR.<br>08 01 65 | 5. CATEGORY OF EMPLOYMENT<br>REGULAR |
|--|--|--------------------------------------|

|          |         |          |   |                                 |
|----------|---------|----------|---|---------------------------------|
| 6. FUNDS | V TO V  | V TO CF  | 7. COST CENTER NO. CHARGEABLE<br>6123 0300 0000 PL 68-043 SECT. 203 | 8. CSC OR OTHER LEGAL AUTHORITY |
|          | CF TO V | CF TO CF |   |                                 |

|  |                                  |
|--|----------------------------------|
| 9. ORGANIZATIONAL DESIGNATIONS<br>DDP/DOD<br>U. S. FIELD | 10. LOCATION OF OFFICIAL STATION |
|  |                                  |

|                                     |                             |                              |
|-------------------------------------|-----------------------------|------------------------------|
| 11. POSITION TITLE<br>CHIEF OF BASE | 12. POSITION NUMBER<br>0261 | 13. SERVICE DESIGNATION<br>D |
|-------------------------------------|-----------------------------|------------------------------|

|  |                         |                    |                    |
|--|-------------------------|--------------------|--------------------|
| 14. CLASSIFICATION SCHEDULE (GS, LB, WY) | 15. OCCUPATIONAL SERIES | 16. GRADE AND STEP | 17. SALARY OR RATE |
| GS                                       | 0136.08                 | 16 3               | 20245              |

18. REMARKS  
EMPLOYEE WILL BE NOTIFIED BY DISPATCH FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND OF HIS RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.

POSTED 1  
BY 45

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|  |  |  |   |   |  |                                  |                                  |                                |         |
|--|--|--|---|---|--|----------------------------------|----------------------------------|--------------------------------|---------|
| 19. ACTION CODE  | 20. EMPLOY CODE  | 21. OFFICE CODING<br>NUMERIC ALPHABETIC<br>43520 000 | 22. STATION CODE<br>75020                                       | 23. INTEGRATE CODE  | 24. ACQUIS. CODE   | 25. DATE OF BIRTH<br>MO. DA. YR. | 26. DATE OF GRADE<br>MO. DA. YR. | 27. DATE OF LET<br>MO. DA. YR. |         |
|  |  |  |   |   |  |                                  | 08 1 30 64                       | 08 1 30 64                     |         |
| 28. WFE EXPIRES<br>MO. DA. YR.   | 29. SPECIAL REFERENCE<br>1 - CDC<br>2 - PICA<br>3 - NONE | 30. RETIREMENT DATA<br>CODE                          | 31. SEPARATION DATA CODE  | 32. CORRECTION/ACCELERATION DATA<br>TYPE MO. DA. YR.        | 33. ZOD DATA   |                                  |                                  | 34. SECURITY RID NO.           | 35. SEA |
|  |  |  |   |   |  |                                  |                                  |                                |         |
| 36. VET. PREFERENCE<br>CODE<br>0 - NONE<br>1 - 5 YR.<br>2 - 10 YR.   | 36. SERV. COMP. DATE<br>MO. DA. YR.                      | 37. LONG. COMP. DATE<br>MO. DA. YR.                  | 38. CAREER CATEGORY<br>CODE<br>CAN. RESV.<br>PROV. TEMP.        | 39. FEGLI / HEALTH INSURANCE<br>CODE<br>0 - NONE<br>1 - YES | 40. SOCIAL SECURITY NO.                                  |                                  |                                  |                                |         |
|  |  |  |   |   |  |                                  |                                  |                                |         |
| 41. PREVIOUS GOVERNMENT SERVICE DATA<br>LOWA<br>0 - NO PREVIOUS SERVICE<br>1 - NO BREAK IN SERVICE<br>2 - BREAK IN SERVICE (LESS THAN 3 YRS)<br>3 - BREAK IN SERVICE (MORE THAN 3 YRS) |  | 42. LEAVE CAT. CODE                                  | 43. FEDERAL TAX DATA<br>FORM EXEMPTED CODE<br>1 - YES<br>2 - NO |   | 44. STATE TAX DATA<br>FORM EXEMPTED<br>1 - YES<br>2 - NO |                                  |                                  |                                |         |
|  |  |  |   |   |  |                                  |                                  |                                |         |

SIGNATURE OR OTHER AUTHENTICATION

*OP/S/6/5*



JCD: 12 NOV 64

SECRET  
(When Filled In)

| OAB  |  |                       |  |   |                                      |  |  |   |  | NOTIFICATION OF PERSONNEL ACTION                                |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
|--|--|-----------------------|--|---|--------------------------------------|--|--|---|--|---|--|--|--|--|---|--|--|--|--|--------------------------------|--|--|--|-------------|--|--|--|
| 1. [ ]   |  |                       |  |   |                                      |  |  |   |  | 2. NATURE OF PERSONNEL ACTION<br>EXCEPTED APPOINTMENT<br>CAREER |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
| 4. EFFECTIVE DATE<br>MO. DA. YR.<br>10   25   64   |  |                       |  |   | 5. CATEGORY OF EMPLOYMENT<br>REGULAR |  |  |   |  | 7. COST CENTER NO. CHARGEABLE<br>5129 0369 0000                 |  |  |  |  | 8. CSC OR OTHER LEGAL AUTHORITY<br>50 USC 403 J |  |  |  |  |                                |  |  |  |             |  |  |  |
| 6. FUNDS<br>Y TO V: [ ]<br>V TO EF: [ ]<br>EF TO V: [X]<br>EF TO EF: [ ]   |  |                       |  |   |                                      |  |  |   |  | 9. ORGANIZATIONAL DESIGNATIONS<br>DDP/DOD<br>U. S. FIELD<br>[ ] |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
| 11. POSITION TITLE<br>OPS OFFICER  |  |                       |  |   |                                      |  |  |   |  | 12. POSITION NUMBER<br>0261                                     |  |  |  |  | 13. SERVICE DESIGNATION<br>D                    |  |  |  |  |                                |  |  |  |             |  |  |  |
| 14. CLASSIFICATION SCHEDULE (SS, LS, etc.)<br>CS   |  |                       |  |   | 15. OCCUPATIONAL SERIES<br>0136.01   |  |  |   |  | 16. GRADE AND STEP<br>6 3                                       |  |  |  |  | 17. SALARY OR RATE<br>20245                     |  |  |  |  |                                |  |  |  |             |  |  |  |
| 18. REMARKS<br><div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">POSTED ON<br/>10/27/64</div> |  |                       |  |   |                                      |  |  |   |  |   |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |  |                       |  |   |                                      |  |  |   |  |   |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
| 19. ACTION CODE<br>13  |  | 20. EMPLOY CODE<br>10 |  | 21. SERVICE CODING<br>MILITARY: 43620<br>ALTERNATIVE: 000 |                                      |  |  | 22. STATION CODE<br>75020                             |  | 23. INTEGREE CODE   |  | 24. HOURS CODE<br>2                                      |  | 25. DATE OF BIRTH<br>MO. DA. YR.<br>08   30   64 |   |  |  | 26. DATE OF GRADE<br>MO. DA. YR.<br>08   30   64 |  |                                |  | 27. DATE OF LEI<br>MO. DA. YR.<br>08   30   64 |  |             |  |  |  |
| 29. HIR. EXPIRES<br>NO. DA. YR.  |  |                       |  | 29. SPECIAL REFERENCE                                     |                                      |  |  | 30. RETIREMENT DATA<br>1. CSC<br>2. AFRICA<br>3. NONE |  |   |  | 31. SEPARATION DATA CODE                                 |  |  |   | 32. CORRECTION/CANCELLATION DATA<br>EOD DATA →         |  |  |  | 33. SECURITY REQ. NO.<br>00000 |  |  |  | 34. SER. MI |  |  |  |
| 35. VET. PREFERENCE<br>CODE 1  |  |                       |  | 36. SERV. COMP. DATE<br>MO. DA. YR.<br>08   42   64       |                                      |  |  | 37. LONG COMP. DATE<br>MO. DA. YR.<br>12   32         |  |   |  | 38. CAREER CATEGORY<br>CODE C                            |  |  |   | 39. FEGLI / HEALTH INSURANCE<br>CODE 1                 |  |  |  | 40. SOCIAL SECURITY NO.        |  |  |  |             |  |  |  |
| 41. PREVIOUS GOVERNMENT SERVICE DATA<br>CODE 1   |  |                       |  |   |                                      |  |  | 42. LEAVE CAL. CODE<br>3                              |  |   |  | 43. FEDERAL TAX DATA<br>FORM EXECUTED: 1 - YES<br>2 - NO |  |  |   | 44. STATE TAX DATA<br>FORM EXECUTED: 1 - YES<br>2 - NO |  |  |  |                                |  |  |  |             |  |  |  |
| SIGNATURE OR OTHER AUTHENTICATION  |  |                       |  |   |                                      |  |  |   |  |   |  |  |  |  |   |  |  |  |  |                                |  |  |  |             |  |  |  |
|  |  |                       |  |   |                                      |  |  |   |  |   |  |  |  |  | POSTED<br>10/13/64                              |  |  |  |  |                                |  |  |  |             |  |  |  |

JGD: 12 NOV 64

SECRET  
(When Filled In)

| DEF NOTIFICATION OF PERSONNEL ACTION  |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
|---|----------------|-------------------------------|------------------------------|---------------------------------------|---------------------------|----------------------------------|---------------------------------------|------------------------------|-------------------|-------------------------|
| 1. SERIAL NUMBER  |                | 2. NAME (LAST-FIRST-MIDDLE)   |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| 3. ACTION   |                | 4. EFFECTIVE DATE             |                              |                                       | 5. CATEGORY OF EMPLOYMENT |                                  |                                       |                              |                   |                         |
| RESIGNATION   |                | 10 24 164                     |                              |                                       | REGULAR                   |                                  |                                       |                              |                   |                         |
| 6. FUNDS  |                | 7. COST CENTER NO. CHARGEABLE |                              | 8. CSC OR OTHER LEGAL AUTHORITY       |                           |                                  |                                       |                              |                   |                         |
| V TO V  |                | 5129 0369 0000                |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| CF TO V   |                | X                             |                              | CF TO CF                              |                           |                                  |                                       |                              |                   |                         |
| 9. ORGANIZATIONAL DESIGNATIONS  |                |                               |                              | 10. LOCATION OF OFFICIAL STATION      |                           |                                  |                                       |                              |                   |                         |
| DDP/DOD<br>U. S. FIELD  |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| 11. POSITION TITLE  |                |                               |                              | 12. POSITION NUMBER                   |                           | 13. SERVICE DESIGNATION          |                                       |                              |                   |                         |
| OPS OFFICER   |                |                               |                              | 0261                                  |                           | D                                |                                       |                              |                   |                         |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)  |                |                               | 15. OCCUPATIONAL SERIES      |                                       | 16. GRADE AND STEP        |                                  | 17. SALARY OR RATE                    |                              |                   |                         |
| GS  |                |                               | 0136.01                      |                                       | 16 3                      |                                  | 20245                                 |                              |                   |                         |
| 18. REMARKS   |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
|   |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL  |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| 19. ACTION CODE   | 20. Empl. Code | 21. OFFICE CODING             |                              | 22. STATION CODE                      | 23. INTEGREE CODE         | 24. MATHS. CODE                  | 25. DATE OF BIRTH                     |                              | 26. DATE OF GRADE | 27. DATE OF LEI         |
| 45  | 10             | NUMERIC ALPHABETIC            |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| 28. NTE EXPIRES   |                | 29. SPECIAL REFERENCE         | 30. RETIREMENT DATA          |                                       | 31. SEPARATION DATA CODE  | 32. CORRECTION/CANCELLATION DATA |                                       | 33. SECURITY FIG. NO.        |                   | 34. SEC                 |
| MO. DA. YR.   |                |                               | 1. CSC<br>2. FICA<br>3. NONE |                                       | 18DC091                   | TYPE MO. DA. YR.                 |                                       | EOD DATA                     |                   |                         |
| 35. VET. PREFERENCE   |                | 36. SERV. COMP. DATE          |                              | 37. LONG. COMP. DATE                  |                           | 38. CAREER CATEGORY              |                                       | 39. FEGLI / HEALTH INSURANCE |                   | 40. SOCIAL SECURITY NO. |
| CODE 0 - NONE<br>1 - 5 PT.<br>2 - 10 PT.  |                | MO. DA. YR.                   |                              | MO. DA. YR.                           |                           | COP YES?<br>HONV YES?            |                                       | CODE 0 - WAIVER<br>1 - YES   |                   | HEALTH INS. CODE        |
| 41. PREVIOUS GOVERNMENT SERVICE DATA  |                |                               | 42. LEAVE CAT. CODE          | 43. FEDERAL TAX DATA                  |                           |                                  | 44. STATE TAX DATA                    |                              |                   |                         |
| CODE 0 - NO PREVIOUS SERVICE<br>1 - NO DEDUPTN LETTER<br>2 - BRYAN IN SERVICE (LESS THAN 3 YRS)<br>3 - BRYAN IN SERVICE (MORE THAN 3 YRS) |                |                               |                              | FORM EXECUTED CODE NO. TAX EXEMPTIONS |                           |                                  | FORM EXECUTED CODE NO. TAX STATE CODE |                              |                   |                         |
|   |                |                               |                              | 1 - YES<br>2 - NO                     |                           |                                  | 1 - YES<br>2 - NO                     |                              |                   |                         |
| SIGNATURE OR OTHER AUTHENTICATION!  |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
|   |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |
| <div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED<br/> <i>JGD 11/12/64</i> </div>              |                |                               |                              |                                       |                           |                                  |                                       |                              |                   |                         |

*JGD*

10 OCT 64

SECRET  
(When Filled In)

| NOTIFICATION OF PERSONNEL ACTION   |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
|--|-----------------|-----------------------------|------------|---------------------------------|---------------------------|----------------------------------|-------------------|----------------------------------|---------------------------------|-------------------------|---------|
| 1. SERIAL NUMBER   |                 | 2. NAME (LAST-FIRST-MIDDLE) |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| REASSIGNMENT   |                 | 4. EFFECTIVE DATE           |            |                                 | 3. CATEGORY OF EMPLOYMENT |                                  |                   |                                  |                                 |                         |         |
|  |                 | MO. DA. YR.                 |            |                                 | REGULAR                   |                                  |                   |                                  |                                 |                         |         |
| 4. FUNDS   |                 | V TO V                      |            | V TO CF                         |                           | 7. COST CENTER NO. CHARGEABLE    |                   |                                  | 8. CSC OR OTHER LEGAL AUTHORITY |                         |         |
| CF TO V  |                 | X                           |            | CF TO CF                        |                           | 5129 0369 0000                   |                   |                                  | 50 USC 403 J                    |                         |         |
| 9. ORGANIZATIONAL DESIGNATIONS   |                 |                             |            |                                 |                           | 10. LOCATION OF OFFICIAL STATION |                   |                                  |                                 |                         |         |
| DDP/DOD.<br>US FIELD   |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| 11. POSITION TITLE   |                 |                             |            |                                 |                           | 12. POSITION NUMBER              |                   | 13. SERVICE DESIGNATION          |                                 |                         |         |
| OPS OFFICER  |                 |                             |            |                                 |                           | 0261                             |                   | D                                |                                 |                         |         |
| 14. CLASSIFICATION SCHEDULE (GS, LW, etc.)   |                 |                             |            | 15. OCCUPATIONAL SERIES         |                           | 16. GRADE AND STEP               |                   | 17. SALARY OR RATE               |                                 |                         |         |
| GS   |                 |                             |            | 0135.01                         |                           | 16 3                             |                   | 20245                            |                                 |                         |         |
| 18. REMARKS  |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL   |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| 19. ACTION CODE  | 20. EMPLOY CODE | 21. OFFICE CODING           |            | 22. STATION CODE                | 23. INTERPLE CODE         | 24. HOURS CODE                   | 25. DATE OF BIRTH | 26. DATE OF GRADE                | 27. DATE OF LEI                 |                         |         |
| 37   | 10              | NUMERIC                     | ALPHABETIC | 75020                           |                           | 2                                |                   |                                  |                                 |                         |         |
| 28. NTE EXPIRES  |                 | 29. SPECIAL REFERENCE       |            | 30. RETIREMENT DATA             |                           | 31. SEPARATION DATA CODE         |                   | 32. CORRECTION/CANCELLATION DATA |                                 | 33. SECURITY REQ. NO.   | 34. SEX |
|  |                 |                             |            | 1 - CSC<br>2 - FICA<br>3 - NONE |                           |                                  |                   |                                  |                                 |                         |         |
| 35. VET. PREFERENCE  |                 | 36. SERV. COMP. DATE        |            | 37. LONG. COMP. DATE            |                           | 38. CAREER CATEGORY              |                   | 39. FEHLT/HEALTH INSURANCE       |                                 | 40. SOCIAL SECURITY NO. |         |
| CODE   |                 | MO. DA. YR.                 |            | MO. DA. YR.                     |                           | CAR. COMP. TEMP.                 |                   | CODE                             |                                 | CODE                    |         |
| 0 - NONE<br>1 - 5 PPT.<br>2 - 10 PPT.  |                 |                             |            |                                 |                           |                                  |                   | O - WAIVER<br>1 - YES            |                                 | HEALTH INS. CODE        |         |
| 41. PREVIOUS GOVERNMENT SERVICE DATA   |                 |                             |            | 42. LEAVE CAT. CODE             |                           | 43. FEDERAL TAX DATA             |                   |                                  | 44. STATE TAX DATA              |                         |         |
| CODE   |                 |                             |            | CODE                            |                           | FORM EXEMPTED                    |                   |                                  | CODE                            |                         |         |
| 0 - NO PREVIOUS SERVICE<br>1 - NO BREAK IN SERVICE<br>2 - BREAK IN SERVICE LESS THAN 3 YRS.<br>3 - BREAK IN SERVICE MORE THAN 3 YRS.   |                 |                             |            |                                 |                           | 1 - YES<br>2 - NO                |                   |                                  | 1 - YES<br>2 - NO               |                         |         |
| SIGNATURE OF OTHER AUTHORITY   |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| FROM: FE - 2   |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |
| <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;">OCT 10 1964</p> <p style="text-align: center; margin: 0;"><i>Col</i></p> </div> |                 |                             |            |                                 |                           |                                  |                   |                                  |                                 |                         |         |

FORM 11-62 1150

Use Previous Edition

SECRET

1150-1  
Issued 11-62  
Replaces 1150-1  
11-62

(When Filled In)



DLG: 30 SEPT 64

SECRET  
(When Filled In)

### NOTIFICATION OF PERSONNEL ACTION

|  |  |                                  |  |
|--|--|----------------------------------|--|
| 1. SERIAL NUMBER                           |  | 2. NAME (LAST-FIRST-MIDDLE)      |  |
| 3. ACTION                                  |  | 4. EFFECTIVE DATE                |  |
| PROMOTION (CORRECTION)                     |  | 08   30   64                     |  |
| 5. CATEGORY OF EMPLOYMENT                  |  | REGULAR                          |  |
| 6. FUNDS                                   |  | 7. COST CENTER NO. (CHANGEABLE)  |  |
| V TO V                                     |  | 5137 1568 0000                   |  |
| CF TO V                                    |  | 8. CSC OR OTHER LEGAL AUTHORITY  |  |
| X  |  | 50 USC 403 J                     |  |
| 9. ORGANIZATIONAL DESIGNATIONS             |  | 10. LOCATION OF OFFICIAL STATION |  |
| DDP FE<br>FE<br>OFFICE OF THE CHIEF        |  |                                  |  |
| 11. POSITION TITLE                         |  | 12. SERVICE DESIGNATION          |  |
| OPS OFFICER DCOS                           |  | D                                |  |
| 14. CLASSIFICATION SCHEDULE (GS, LB, etc.) |  | 15. OCCUPATIONAL SERIES          |  |
| GS   |  | 0136.01                          |  |
| 16. GRADE AND STEP                         |  | 17. SALARY OR RATE               |  |
| 16 3                                       |  | 20245                            |  |

18. REMARKS  
 THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 08/30/64 AS FOLLOWS:  
 TO DELETE INTEGRATED INFORMATION.

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|                                       |                       |                     |                     |                          |                                |                      |                         |                       |                 |
|---------------------------------------|-----------------------|---------------------|---------------------|--------------------------|--------------------------------|----------------------|-------------------------|-----------------------|-----------------|
| 19. ACTION CODE                       | 20. EMPLOY. DATE      | 21. OFFICE CODING   |                     | 22. ACTION CODE          | 23. EMPLOYEE CODE              | 24. HOURS CODE       | 25. DATE OF BIRTH       | 26. DATE OF GRADE     | 27. DATE OF LET |
|                                       |                       | NUMERIC             | ALPHABETIC          |                          |                                |                      |                         | MO. DA. YR.           | MO. DA. YR.     |
| 28. HTE EXPIRES                       | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA |                     | 31. SEPARATION DATA CODE | 32. CORRECTION CONCERNING DATA | EOD DATA             |                         | 33. SECURITY REG. NO. | 34. SEN         |
| MO. DA. YR.                           |                       | 1. CSC              | 2. PICA             |                          |                                |                      |                         |                       |                 |
|                                       |                       | 3. NONE             |                     |                          |                                |                      |                         |                       |                 |
| 35. VLT. PREFERENCE                   | 36. SERV. COMP. DATE  | 37. LONG COMP. DATE | 38. CAREER CATEGORY |                          | 39. HEALTH INSURANCE           |                      | 40. SOCIAL SECURITY NO. |                       |                 |
| CODE                                  | MO. DA. YR.           | MO. DA. YR.         | 244                 | 245                      | 246                            | HEALTH INS. CODE     |                         |                       |                 |
|                                       |                       |                     | TEMP                | TEMP                     |                                |                      |                         |                       |                 |
| 41. PREVIOUS GOVERNMENT SERVICE DATA  |                       |                     | 42. LEAVE EST. CODE | 43. FEDERAL TAX DATA     |                                | 44. STATE TAX DATA   |                         |                       |                 |
| CODE                                  |                       |                     |                     | 44. TAX IDENTIFICATION   | 45. TAX EXEMPTION              | 46. STATE TAX EXEMPT |                         |                       |                 |
| 1. NO PREVIOUS SERVICE                |                       |                     |                     |                          | 1. YES                         |                      |                         |                       |                 |
| 2. BREAK IN SERVICE (LESS THAN 3 YRS) |                       |                     |                     |                          | 2. NO                          |                      |                         |                       |                 |
| 3. BREAK IN SERVICE (MORE THAN 3 YRS) |                       |                     |                     |                          |                                |                      |                         |                       |                 |

SIGNATURE OR OTHER AUTHENTICATION

**POSTED**  
*relisley mcy*

FORM 1150  
11-62

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

DLB: 16 SEPT 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

|  |  |  |                                  |                                 |  |
|--|--|--|----------------------------------|---------------------------------|--|
| 1. SERIAL NUMBER                           |  | 2. NAME (LAST-FIRST-MIDDLE)  |                                  |                                 |  |
| 3. NATURE OF PERSONNEL ACTION              |  | 4. EFFECTIVE DATE  |                                  | 5. CATEGORY OF EMPLOYMENT       |  |
| PROMOTION (CORRECTION)                     |  | 08   30   64   |                                  | REGULAR                         |  |
| 6. FUNDS                                   |  | 7. COST CENTER NO. CHARGEABLE  |                                  | 8. CSC OR OTHER LEGAL AUTHORITY |  |
| V TO V<br>CF TO V                          |  | V TO CF<br>CF TO CF  |                                  | 5137 1566 0000<br>50 USC 403 J  |  |
| 9. ORGANIZATIONAL DESIGNATIONS             |  |  | 10. LOCATION OF OFFICIAL STATION |                                 |  |
| DDP FE<br>FE<br>OFFICE OF THE CHIEF        |  |  |                                  |                                 |  |
| 11. POSITION TITLE                         |  | 12. POSITION NUMBER  |                                  | 13. SERVICE DESIGNATION         |  |
| OPS OFFICER DCOS                           |  | 3003   |                                  | D                               |  |
| 14. CLASSIFICATION SCHEDULE (GS, LP, etc.) |  | 15. OCCUPATIONAL SERIES  |                                  | 16. GRADE AND STEP              |  |
| GS   |  | 0136.01  |                                  | 03 1<br>16 3                    |  |
| 17. SALARY OR RATE                         |  | 18. REMARKS  |                                  |                                 |  |
| 14860<br>20245                             |  | THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 08/30/64 AS FOLLOWS:<br>ITEM #1, SERIAL NUMBER, WHICH READ 560947, TO READ 060947. |                                  |                                 |  |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|                                      |  |                                 |             |                          |                                  |                            |                       |                         |                 |
|--------------------------------------|--|---------------------------------|-------------|--------------------------|----------------------------------|----------------------------|-----------------------|-------------------------|-----------------|
| 19. ACTION CODE                      | 20. EMPLOYER CODE  | 21. OFFICE CODING               |             | 22. VARIATION CODE       | 23. INITIATOR CODE               | 24. HOURS CODE             | 25. DATE OF BIRTH     | 26. DATE OF ENTRY       | 27. DATE OF LEI |
|                                      |  | NUMERIC                         | ALPHABETIC  |                          |                                  |                            | MO. DA. YR.           | MO. DA. YR.             | MO. DA. YR.     |
| 28. NIE EXPIRES                      | 29. SPECIAL PREFERENCE   | 30. RETIREMENT DATA             |             | 31. SEPARATION DATA CODE | 32. CORRECTION/CANCELLATION DATA |                            | 33. SECURITY RFG. NO. |                         | 34. SEP.        |
| MO. DA. YR.                          |  | 1 - CSC<br>2 - FICA<br>3 - TYPE | CODE        |                          | TYPE                             | MO. DA. YR.                | EOD DATA              |                         |                 |
| 35. VET. PREFERENCE                  | 36. SERV. COMP. DATE   | 37. LONG. COMP. DATE            |             | 38. CAREER CATEGORY      |                                  | 39. FEUIL/HEALTH INSURANCE |                       | 40. SOCIAL SECURITY NO. |                 |
| CODE                                 | 0 - NONE<br>1 - 5 YR<br>2 - 10 YR  | MO. DA. YR.                     | MO. DA. YR. | TYPE                     | CODE                             | CODE                       | 0 - WAIVER<br>1 - YES | HEALTH INS. CODE        |                 |
| 41. PREVIOUS GOVERNMENT SERVICE DATA | 42. LEAVE CAT. CODE  | 43. FEDERAL TAX DATA            |             | 44. STATE TAX DATA       |                                  |                            |                       |                         |                 |
| CODE                                 | 0 - NO PREVIOUS SERVICE<br>1 - NO LEAVE IN SERVICE<br>2 - SERVICE IN SERVICE LESS THAN 2 YEARS<br>3 - SERVICE IN SERVICE MORE THAN 2 YEARS | CODE                            | FORM NUMBER | CODE                     | NO. TAX EXEMPTIONS               | FORM DISCUSSED             | CODE                  | NO. TAX STATE CODE      | LEAVE           |

SIGNATURE OF OTHER AUTHENTICATION

POSTED  
09/18/64 [Signature]

FORM 1150

Use Previous Edition

SECRET 16 SEP 1964

GROUP 1 Excluded from automatic downgrading and declassification

(When Filled In)

28 AUG 64

SECRET  
(When Filled In)

ODF

NOTIFICATION OF PERSONNEL ACTION

|   |          |                                  |         |         |          |                |  |
|---|----------|----------------------------------|---------|---------|----------|----------------|--|
| 1. SERIAL NUMBER  |          | 2. NAME (LAST-FIRST-MIDDLE)      |         |         |          |                |  |
| 3. NATURE OF PERSONNEL ACTION   |          |                                  |         |         |          |                |  |
| PROMOTION   |          | 4. EFFECTIVE DATE                |         |         |          |                |  |
|   |          | 08   30   64                     |         |         |          |                |  |
| 5. CATEGORY OF EMPLOYMENT   |          | REGULAR                          |         |         |          |                |  |
| 6. FUNDS  |          | 7. COST CENTER NO. (CHARGEABLE)  |         |         |          |                |  |
| <table border="1"> <tr> <td>V TO V</td> <td>V TO CP</td> </tr> <tr> <td>CP TO V</td> <td>CP TO CP</td> </tr> </table> |          | V TO V                           | V TO CP | CP TO V | CP TO CP | 5137 1566 0000 |  |
| V TO V  | V TO CP  |                                  |         |         |          |                |  |
| CP TO V   | CP TO CP |                                  |         |         |          |                |  |
| 8. CSC OR OTHER LEGAL AUTHORITY   |          | 50 USC 403 J                     |         |         |          |                |  |
| 9. ORGANIZATIONAL DESIGNATIONS  |          | 10. LOCATION OF OFFICIAL STATION |         |         |          |                |  |
| DDP FE<br>FE<br>OFFICE OF THE CHIEF   |          |                                  |         |         |          |                |  |
| 11. POSITION TITLE  |          | 12. SERVICE DESIGNATION          |         |         |          |                |  |
| OPS OFFICER DCOS  |          | D                                |         |         |          |                |  |
| 13. CLASSIFICATION SCHEDULE (GS, LB, FH)  |          | 14. GRADE AND STEP               |         |         |          |                |  |
| GS  |          | 03 1<br>16 3                     |         |         |          |                |  |
| 15. OCCUPATIONAL SERIES   |          | 16. SALARY OR RATE               |         |         |          |                |  |
| 0136.01   |          | 14860<br>20245                   |         |         |          |                |  |
| 17. REMARKS   |          |                                  |         |         |          |                |  |
| TOKYO, JAPAN  |          |                                  |         |         |          |                |  |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|                                      |                       |                      |                          |                                    |                    |                         |                       |                 |
|--------------------------------------|-----------------------|----------------------|--------------------------|------------------------------------|--------------------|-------------------------|-----------------------|-----------------|
| 19. ACTION CODE                      | 20. EMPLOY CODE       | 21. OFFICE CODING    | 22. STATION CODE         | 23. INITIATE CODE                  | 24. RESIGN CODE    | 25. DATE OF BIRTH       | 26. DATE OF GRADE     | 27. DATE OF LEI |
| 22                                   | 10                    | 45380 FE             | 37537                    | 1                                  | 3                  |                         | 08 30 64              | 09 30 64        |
| 28. HIRE EXPIRES                     | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA  | 31. SEPARATION DATA CODE | 32. CORRECTIVE IDENTIFICATION DATA | EOD DATA           |                         | 33. SECURITY REQ. NO. | 34. SSN         |
|                                      |                       |                      |                          |                                    |                    |                         |                       |                 |
| 35. VET. PREFERENCE                  | 36. SERV. COMP. DATE  | 37. LONG. COMP. DATE | 38. CAREER CATEGORY      | 39. SICK/HEALTH INSURANCE          |                    | 40. SOCIAL SECURITY NO. |                       |                 |
|                                      |                       |                      |                          |                                    |                    |                         |                       |                 |
| 41. PREVIOUS GOVERNMENT SERVICE DATA |                       | 42. LEAVE CAT. CODE  | 43. FEDERAL TAX DATA     |                                    | 44. STATE TAX DATA |                         |                       |                 |
|                                      |                       |                      |                          |                                    |                    |                         |                       |                 |

SIGNATURE OR OTHER AUTHENTICATION

POSTED  
09/15/64 [Signature]

SECRET  
(When Filled In)

OLE: 20 SEPT 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)

3. NATURE OF PERSONNEL ACTION: CONVERSION  
4. EFFECTIVE DATE: 08 25 64  
5. CATEGORY OF EMPLOYMENT: REGULAR

6. FUNDS: V TO V, V TO CF, CF TO V, CF TO CF  
7. COST CENTER NO. CHARGEABLE: 5137 1563 0000  
8. CSC OR OTHER LEGAL AUTHORITY: 50 USC 1103 J

9. ORGANIZATIONAL DESIGNATIONS: DDP FE FOREIGN FIELD OFFICE OF THE CHIEF  
10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE: OPS OFFICER DCOS  
12. SERVICE DESIGNATION: D

14. CLASSIFICATION SCHEDULE (GS, FS, etc.): GS  
15. OCCUPATIONAL SERIES: 0135.01  
16. GRADE AND STEP: 15 5  
17. SALARY OR RATE: 18740

18. REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

Grid for personnel data including: 19. ACTION CODE, 20. EMPLOY CODE, 21. OFFICE SYMBOL, 22. SECTION CODE, 23. INTEGRAL CODE, 24. HOURS, 25. DATE OF BIRTH, 26. DATE OF DECEASE, 27. DATE OF LEI, 28. TITLE EXPIRES, 29. SPECIAL REFERENCE, 30. RETIREMENT DATA, 31. SEPARATION DATA CODE, 32. CORRECTION/TERMINATION CODE, 33. SECURITY REF. NO., 34. VET. PREFERENCE, 35. SERVA. COMP. DATE, 36. LEAVE, COMP. DATE, 37. CAREER CATEGORY, 38. FECLU/HEALTH INSURANCE, 39. SOCIAL SECURITY NO., 40. PREVIOUS GOVERNMENT SERVICE DATA, 41. LEAVE ENT, 42. FEDERAL TAX DATA, 43. STATE TAX DATA

ROD DATA

POSTED  
10/1/64 mch

SIGNATURE OR OTHER AUTHENTICATION



45 380 CF

| OLD SALARY RATE |      |          |                | NEW SALARY RATE |      |          |                | TYPE ACTION |     |     |
|-----------------|------|----------|----------------|-----------------|------|----------|----------------|-------------|-----|-----|
| Grade           | Step | Salary   | Last Eff. Date | Grade           | Step | Salary   | Effective Date | PSA         | LSA | ADJ |
| GS 15           | 4    | \$17,210 | 06/10/62       | GS 15           | 9    | \$17,725 | 06/07/64       |             |     |     |

9 Remarks and Authentication

/ / NO EXCESS LWOP 03  
 / / IN PAY STATUS AT END OF WAITING PERIOD 7/2  
 / / LWOP STATUS AT END OF WAITING PERIOD  
 CLERKS INITIALS AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE: *[Signature]* DATE: *14 May 64*

**PAY CHANGE NOTIFICATION**

Form 560  
9-61

Obsolete Previous Edition

(451)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 9 JANUARY 1964.

| NAME       | SERIAL | ORGN | FUNDS | GR-ST | OLD SALARY | NEW SALARY        |
|------------|--------|------|-------|-------|------------|-------------------|
| [Redacted] |        | 45   | 380   | CF    | GS 15 4    | \$16,005 \$17,210 |

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 14 OCTOBER 1962

| NAME       | SERIAL | ORGN  | FUNDS | GR-ST | OLD SALARY | NEW SALARY   |
|------------|--------|-------|-------|-------|------------|--------------|
| [Redacted] | 060947 | 56380 | CF    | 15 4  | \$14705    | 15 4 \$16005 |

|   |      |          |                |                 |      |          |                |             |    |     |
|---|------|----------|----------------|-----------------|------|----------|----------------|-------------|----|-----|
| OLD SALARY RATE   |      |          |                | NEW SALARY RATE |      |          |                | TYPE ACTION |    |     |
| Grade   | Step | Salary   | Last Eff. Date | Grade           | Step | Salary   | Effective Date | PS          | LS | ADJ |
| GS 13   | 3    | \$14,380 | 12/11/60       | GS 13           | 4    | \$14,700 | 00/10/61       |             |    |     |
| 8. Remarks and Authentication   |      |          |                |                 |      |          |                |             |    |     |
| 3<br>742<br>/ / NO EXCESS LWOP / / EXCESS LWOP<br>/ / IN PAY STATUS AT END OF WAITING PERIOD<br>/ / IN LWOP STATUS AT END OF WAITING PERIOD<br>CLERKS INITIALS: [Handwritten Initials] AUDITED BY: [Handwritten Initials]<br><b>PAY CHANGE NOTIFICATION</b> |      |          |                |                 |      |          |                |             |    |     |

SECRET  
(WHEN FILLED IN)

|   |      |                    |                         |                    |                        |
|---|------|--------------------|-------------------------|--------------------|------------------------|
| 1. EMP. SERIAL NO.  |      | 3. ASSIGNED ORGAN. |                         | 4. FUNDS           | 5. ALLOTMENT           |
|   |      | DDP/FE 11          |                         | UV                 |                        |
| 6. OLD SALARY RATE  |      |                    |                         | 7. NEW SALARY RATE |                        |
| GRADE   | STEP | SALARY             | LAST EFFECTIVE DATE     |                    |                        |
| GS 13   | 2    | \$14,055           | NO                      | DA                 | YR.                    |
|   |      |                    | 06                      | 14                 | 59                     |
| GRADE   | STEP | SALARY             | EFFECTIVE DATE          |                    |                        |
| GS 13   | 3    | \$14,380           | NO                      | DA                 | YR.                    |
|   |      |                    | 12                      | 11                 | 60                     |
| TO BE COMPLETED BY THE OFFICE OF COMPTROLLER  |      |                    |                         |                    |                        |
| 9. CHECK ONE  |      |                    | 9. NUMBER OF HOURS LWOP |                    |                        |
| <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP<br>IF EXCESS LWOP, CHECK FOLLOWING:<br><input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD |      |                    |                         |                    |                        |
|   |      |                    | 10. INITIALS OF CLERK   |                    | 11. AUDITED BY         |
|   |      |                    | [Handwritten Initials]  |                    | [Handwritten Initials] |
| TO BE COMPLETED BY THE OFFICE OF PERSONNEL  |      |                    |                         |                    |                        |
| 12. TYPE OF ACTION  |      |                    | 13. REMARKS             |                    |                        |
| <input type="checkbox"/> P.S.I. <input type="checkbox"/> L.S.I. <input type="checkbox"/> PAY ADJUSTMENT   |      |                    | 7.                      |                    |                        |
| 14. AUTHENTICATION  |      |                    |                         |                    |                        |
| POSTED TO 2808<br>[Handwritten Initials]<br>OBLIGATED APPROVED<br><b>PAY CHANGE NOTIFICATION</b>  |      |                    |                         |                    |                        |

660 OBSOLETE PREVIOUS EDITION  
 5010 USE FORM 5000, AND 5000.

SECRET

OFFICIAL PERSONNEL FOLDER (4)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 85-566 AND OGI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

|    |            |            |       |         |            |            |
|----|------------|------------|-------|---------|------------|------------|
| SD | NAME       | SERIAL     | ORGN  | GR-ST   | OLD SALARY | NEW SALARY |
| 01 | [Redacted] | [Redacted] | 51 71 | GS-15 2 | \$13,070   | \$14,055   |

EMMETT D. ECHOLS

SECRET  
(When Filled In)

**NOTIFICATION OF PERSONNEL ACTION**

BS 4 SEPT 59

|                 |  |                             |  |  |                                 |  |  |                             |  |              |  |                 |  |                                     |  |
|-----------------|--|-----------------------------|--|--|---------------------------------|--|--|-----------------------------|--|--------------|--|-----------------|--|-------------------------------------|--|
| 1. Serial No.   |  | 2. Name (Last-First-Middle) |  |  | 3. Date Of Birth                |  |  | 4. Vet. Pref.               |  | 5. Sex       |  | 6. CS - EOD     |  |                                     |  |
|                 |  |                             |  |  | Mo.   Da.   Yr.                 |  |  | None-0<br>5 Pt-1<br>10 Pt-2 |  | Code         |  | Mo.   Da.   Yr. |  |                                     |  |
|                 |  |                             |  |  |                                 |  |  | 1                           |  | M 1          |  | 09   28   52    |  |                                     |  |
| 7. SCD          |  | 8. CSC Rmt.                 |  |  | 9. CSC Or Other Legal Authority |  |  | 10. Apmt. Affidav.          |  | 11. FEGLI    |  | 12. LCD         |  | 13. <small>Unit, Serv. Code</small> |  |
| Mo.   Da.   Yr. |  | Yes-1   Code                |  |  | 50 USCA 403                     |  |  | Mo.   Da.   Yr.             |  | Yes-1   Code |  | Mo.   Da.   Yr. |  | Yes-1   Code                        |  |
| 08   06   42    |  | 1                           |  |  |                                 |  |  |                             |  |              |  | 09   28   52    |  |                                     |  |

**PREVIOUS ASSIGNMENT**

|   |  |                          |  |                  |  |                                  |  |                   |  |                          |  |  |
|---|--|--------------------------|--|------------------|--|----------------------------------|--|-------------------|--|--------------------------|--|--|
| 14. Organizational Designations                               |  |                          |  | Code             |  | 15. Location Of Official Station |  |                   |  | Station Code             |  |  |
| DDP FE<br>FE/<br>DEPUTY FOR OPERATIONS<br>OFFICE OF THE CHIEF |  |                          |  | 5171             |  |                                  |  |                   |  | 37587                    |  |  |
| 16. Dept. Field   |  | 17. Position Title       |  | 18. Position No. |  | 19. Serv.                        |  | 20. Occas. Series |  |                          |  |  |
| Dept - 1<br>USMIL - 3<br>Figs - 5                             |  | Code<br>5<br>OPS OFFICER |  | 3936             |  | GS                               |  | 0136.01           |  |                          |  |  |
| 21. Grade & Step  |  | 22. Salary Or Rate       |  | 23. SD           |  | 24. Date Of Grade                |  | 25. PSI Due       |  | 26. Appropriation Number |  |  |
| 03<br>15 2  |  | \$ 11660<br>13070        |  | 01               |  | 12   15   57                     |  | 06   14   59      |  | 9 3735 55 005            |  |  |

**ACTION**

|                      |  |      |  |               |  |                      |  |          |  |                     |  |
|----------------------|--|------|--|---------------|--|----------------------|--|----------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date |  | 29. Type Of Employee |  | Code     |  | 30. Separation Data |  |
| REASSIGNMENT         |  | 56   |  | 09   06   59  |  | REGULAR              |  | OM<br>01 |  |                     |  |

**PRESENT ASSIGNMENT**

|                                      |  |                              |  |                  |  |                                  |  |                   |  |                          |  |  |
|--------------------------------------|--|------------------------------|--|------------------|--|----------------------------------|--|-------------------|--|--------------------------|--|--|
| 31. Organizational Designations      |  |                              |  | Code             |  | 32. Location Of Official Station |  |                   |  | Station Code             |  |  |
| DDP FE<br>FE/<br>OFFICE OF THE CHIEF |  |                              |  | 5171             |  |                                  |  |                   |  | 37587                    |  |  |
| 33. Dept. Field                      |  | 34. Position Title           |  | 35. Position No. |  | 36. Serv.                        |  | 37. Occas. Series |  |                          |  |  |
| Dept - 1<br>USMIL - 3<br>Figs - 5    |  | Code<br>5<br>OPS OFF (D COS) |  | 2003             |  | GS                               |  | 0136.01           |  |                          |  |  |
| 38. Grade & Step                     |  | 39. Salary Or Rate           |  | 40. SD           |  | 41. Date Of Grade                |  | 42. PSI Due       |  | 43. Appropriation Number |  |  |
| 03<br>15 2                           |  | \$ 11660<br>13070            |  | 01               |  | 12   15   57                     |  | 12   11   60      |  | 0137 7351 3000           |  |  |

44. Remarks

FOULDED  
*[Signature]*

CS  
SECRET  
(WHEN FILLED IN)

742

| 1. EMP. SERIAL NO.  |      | 2. NAME  |                     |     |     | 3. ASSIGNED ORGAN.                                 |      | 4. FUNDS |                | 5. ALLOTMENT |     |
|---|------|----------|---------------------|-----|-----|--|------|----------|----------------|--------------|-----|
|   |      |          |                     |     |     | DDP/FE -11   |      | V-20     |                |              |     |
| 6. OLD SALARY RATE  |      |          |                     |     |     | 7. NEW SALARY RATE                                 |      |          |                |              |     |
| GRADE   | STEP | SALARY   | LAST EFFECTIVE DATE |     |     | GRADE  | STEP | SALARY   | EFFECTIVE DATE |              |     |
|   |      |          | MO.                 | DA. | YR. |  |      |          | MO.            | DA.          | YR. |
| GS 15   | 1    | \$12,770 | 12                  | 15  | 57  | GS 15  | 2    | 13,070   | 06             | 14           | 59  |
| TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER  |      |          |                     |     |     |  |      |          |                |              |     |
| 8. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP |      |          |                     |     |     | 9. NUMBER OF HOURS LWOP                            |      |          |                |              |     |
| IF EXCESS LWOP, CHECK FOLLOWING:  |      |          |                     |     |     | 10. INITIALS OF CLERK                              |      |          |                |              |     |
| <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD                           |      |          |                     |     |     | 11. AUDITED BY                                     |      |          |                |              |     |
| <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD                          |      |          |                     |     |     |  |      |          |                |              |     |
| TO BE COMPLETED BY THE OFFICE OF PERSONNEL  |      |          |                     |     |     |  |      |          |                |              |     |
| 12. PROJECTED SALARY RATE AND EFFECTIVE DATE  |      |          |                     |     |     | 13. REMARKS  |      |          |                |              |     |
| GRADE   | STEP | SALARY   | MO.                 | DA. | YR. | 3<br>742<br>70 12 5/3/59<br>10/16<br>1/30/59<br>AH |      |          |                |              |     |
|   |      |          |                     |     |     |  |      |          |                |              |     |
| 14. AUTHENTICATION  |      |          |                     |     |     |  |      |          |                |              |     |
| PERIODIC STEP INCREASE - AUTHENTICATION   |      |          |                     |     |     |  |      |          |                |              |     |

FORM 57, 560b

SECRET

PERSONNEL FOLDER (4)

SECRET

| 1<br>NOTIFICATION OF PERSONNEL ACTION |  |                             |  |                                 |  |                  |  |                    |                                 |  |                      |                         |                         |  |   |  |
|---------------------------------------|--|-----------------------------|--|---------------------------------|--|------------------|--|--------------------|---------------------------------|--|----------------------|-------------------------|-------------------------|--|---|--|
| ARE: MAY 1959                         |  |                             |  |                                 |  |                  |  |                    |                                 |  |                      |                         |                         |  |   |  |
| 1. Serial No.                         |  | 2. Name (Last-First-Middle) |  |                                 |  | 3. Date Of Birth |  |                    | 4. Vet. Prof.                   |  | 5. Sex               | 6. C. LOD               |                         |  |   |  |
|                                       |  |                             |  |                                 |  | Mo. Da. Yr.      |  |                    | Non-0 Code<br>5 Pt-1<br>10 Pt-9 |  | M 1                  | Mo. Da. Yr.<br>09 28 52 |                         |  |   |  |
| 7. SCD                                |  | 8. CSC Catmt.               |  | 9. CSC Or Other Legal Authority |  |                  |  | 10. Asmt. Affidav. |                                 |  | 11. FEGLI            |                         | 12. LCD                 |  | 13. <small>ALL SERV</small><br>CSC Code |  |
| Mo. Da. Yr.<br>08 06 42               |  | Ycs-1<br>No-2<br>1          |  | 50 USCA 403 J                   |  |                  |  | Mo. Da. Yr.        |                                 |  | Ycs-1 Code<br>No-2 1 |                         | Mo. Da. Yr.<br>09 28 52 |  | Ycs-1<br>No-2<br>2                      |  |

## PREVIOUS ASSIGNMENT

|                                   |  |                    |  |                  |  |                                  |  |                         |  |                          |  |
|-----------------------------------|--|--------------------|--|------------------|--|----------------------------------|--|-------------------------|--|--------------------------|--|
| 14. Organizational Designations   |  |                    |  | Code             |  | 18. Location Of Official Station |  |                         |  | Station Code             |  |
| DDP FE<br>FI CI STAFF             |  |                    |  | 5113             |  | WASH., D. C.                     |  |                         |  | 75013                    |  |
| 16. Dept. - Field                 |  | 17. Position Title |  | 18. Position No. |  |                                  |  | 19. Serv.               |  | 20. Occup. Series        |  |
| Dept - 1<br>USfld - 3<br>Fign - 5 |  | 2<br>I.O.FI STF CH |  | 3448             |  |                                  |  | GS                      |  | 0136.51                  |  |
| 21. Grade & Step                  |  | 22. Salary Or Rate |  | 23. SD           |  | 24. Date Of Grade                |  | 25. P.I. Date           |  | 26. Appropriation Number |  |
| 15 1                              |  | \$ 12770           |  | DI               |  | Mo. Da. Yr.<br>12 15 57          |  | Mo. Da. Yr.<br>06 14 59 |  | 8 3700 20                |  |

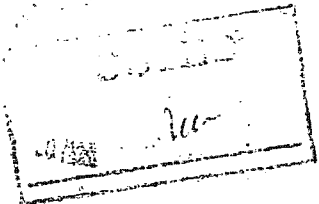
## ACTION

|  |  |      |  |                         |  |                      |  |      |  |                     |  |
|--|--|------|--|-------------------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action                               |  | Code |  | 28. Eff. Date           |  | 29. Type Of Employee |  | Code |  | 30. Separation Date |  |
| REASSIGNMENT AND TRANSFER<br>TO CONFIDENTIAL FONDS |  | 05   |  | Mo. Da. Yr.<br>05 03 59 |  | REGULAR              |  | 01   |  |                     |  |

## PRESENT ASSIGNMENT

|   |  |                    |  |                  |  |                                  |  |                         |  |                          |  |
|---|--|--------------------|--|------------------|--|----------------------------------|--|-------------------------|--|--------------------------|--|
| 31. Organizational Designations                               |  |                    |  | Code             |  | 32. Location Of Official Station |  |                         |  | Station Code             |  |
| DDP FE<br>FE/<br>DEPUTY FOR OPERATIONS<br>OFFICE OF THE CHIEF |  |                    |  | 5171             |  |                                  |  |                         |  | 37587                    |  |
| 33. Dept. - Field   |  | 34. Position Title |  | 35. Position No. |  |                                  |  | 36. Serv.               |  | 37. Occup. Series        |  |
| Dept - 1<br>USfld - 3<br>Fign - 5                             |  | 5<br>AREA OPS OFF  |  | 3926             |  |                                  |  | GS                      |  | 0135.01                  |  |
| 38. Grade & Step  |  | 39. Salary Or Rate |  | 40. SD           |  | 41. Date Of Grade                |  | 42. P.I. Date           |  | 43. Appropriation Number |  |
| 15 1  |  | \$ 12770           |  | DI               |  | Mo. Da. Yr.<br>12 15 57          |  | Mo. Da. Yr.<br>06 14 59 |  | 7 3735 55 005            |  |

44. Remarks  
SUBJECT TO APPROVED MEDICAL CLEARANCE PRIOR TO BEING SENT OVERSEAS.



SECRET

NOTIFICATION OF PERSONNEL ACTION

APR: 19 MAY 1959

|                 |  |                             |  |                                 |                  |  |                    |                            |  |               |  |                 |  |               |  |
|-----------------|--|-----------------------------|--|---------------------------------|------------------|--|--------------------|----------------------------|--|---------------|--|-----------------|--|---------------|--|
| 1. Serial No.   |  | 2. Name (Last-First-Middle) |  |                                 | 3. Date of Birth |  |                    | 4. Vet. Prof.              |  | 5. Sex        |  | 6. CSC LOD      |  |               |  |
|                 |  |                             |  |                                 | Mo.   Da.   Yr.  |  |                    | Non-0<br>5 Pt-1<br>10 Pt-2 |  | Code          |  | Mo.   Da.   Yr. |  |               |  |
|                 |  |                             |  |                                 |                  |  |                    | 1                          |  | M 1           |  | 09   28   52    |  |               |  |
| 7. SCID         |  | 8. CSC Retmt.               |  | 9. CSC Or Other Legal Authority |                  |  | 10. Appr. Allidat. |                            |  | 11. ILCU      |  | 12. LCU         |  | 13. Other Use |  |
| Mo.   Da.   Yr. |  | Yes-1<br>No-2               |  | Code                            |                  |  | Mo.   Da.   Yr.    |                            |  | Yes-1<br>No-2 |  | Code            |  | Yes-1<br>No-2 |  |
| 08   06   42    |  | 1                           |  | 50 USCA 403 J                   |                  |  |                    |                            |  | 09            |  | 28   52         |  | 2             |  |

PREVIOUS ASSIGNMENT

|   |  |                    |  |        |  |                                  |  |           |  |                          |  |
|---|--|--------------------|--|--------|--|----------------------------------|--|-----------|--|--------------------------|--|
| 14. Organizational Designations                               |  |                    |  | Code   |  | 15. Location Of Official Station |  |           |  | Station Code             |  |
| DDP FE<br>FE/<br>DEPUTY FOR OPERATIONS<br>OFFICE OF THE CHIEF |  |                    |  | 5171   |  |                                  |  |           |  | 37587                    |  |
| 16. Dept. Field   |  | 17. Position Title |  |        |  | 18. Position No.                 |  | 19. Serv. |  | 20. Occup. Series        |  |
| Unit - 1<br>Field - 3<br>Trng - 5                             |  | AREA OPS OFF       |  |        |  | 3936                             |  | GS        |  | 0136.01                  |  |
| 21. Grade & Step  |  | 22. Salary Or Rate |  | 23. SD |  | 24. Date Of Grade / 25. In Date  |  |           |  | 26. Appropriation Number |  |
| 15 1  |  | \$ 12770           |  | DI     |  | 12   15   57   06   14   59      |  |           |  | 9 3735 55 005            |  |

ACTION

|                      |  |      |  |               |  |  |                        |  |      |  |                     |  |
|----------------------|--|------|--|---------------|--|--|------------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date |  |  | 29. Type Of Employment |  | Code |  | 30. Separation Data |  |
|                      |  | 58   |  | 05   08   59  |  |  | REGULAR                |  | 04   |  |                     |  |

PRESENT ASSIGNMENT

|   |  |                                  |  |        |  |                                  |  |           |  |                          |  |
|---|--|----------------------------------|--|--------|--|----------------------------------|--|-----------|--|--------------------------|--|
| 31. Organizational Designations                               |  |                                  |  | Code   |  | 32. Location Of Official Station |  |           |  | Station Code             |  |
| DDP FE<br>FE/<br>DEPUTY FOR OPERATIONS<br>OFFICE OF THE CHIEF |  |                                  |  | 5171   |  |                                  |  |           |  | 37587                    |  |
| 33. Dept. Field   |  | 34. Position Title               |  |        |  | 35. Position No.                 |  | 36. Serv. |  | 37. Occup. Series        |  |
| Unit - 1<br>Field - 3<br>Trng - 5                             |  | POL ASST 1ST SEC*<br>OPS OFFICER |  |        |  | 3936                             |  | FSR<br>GS |  | 0136.01                  |  |
| 38. Grade & Step  |  | 39. Salary Or Rate               |  | 40. SD |  | 41. Date Of Grade / 42. In Date  |  |           |  | 43. Appropriation Number |  |
| 03<br>15 1  |  | \$ 12770                         |  | DI     |  | 12   15   57   06   14   59      |  |           |  | 9 3735 55 005            |  |

POSTED  
0.12.59  
[Signature]

SECRET

(4)

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI  
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

| NAME       | SERIAL | GRADE-STEP | OLD SALARY | NEW SALARY |
|------------|--------|------------|------------|------------|
| [REDACTED] |        | GS-15-1    | \$11,510   | \$12,770   |

GORDON H. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

**SECRET**  
(When Filled In)

| NOTIFICATION OF PERSONNEL ACTION |     |                             |               |                                 |               |                    |     |     |                             |               |          |     |             |     |
|----------------------------------|-----|-----------------------------|---------------|---------------------------------|---------------|--------------------|-----|-----|-----------------------------|---------------|----------|-----|-------------|-----|
| ARE                              |     |                             |               |                                 |               |                    |     |     |                             |               |          |     |             |     |
| 1. Serial No.                    |     | 2. Name (Last-First-Middle) |               |                                 |               | 3. Date Of Birth   |     |     | 4. Vet. Prof.               |               | 5. Sex   |     | 6. CS - FOD |     |
|                                  |     |                             |               |                                 |               | Mo. Da. Yr.        |     |     | None-0<br>5 Pt-1<br>10 Pt-2 |               | Code     |     | Mo. Da. Yr. |     |
|                                  |     |                             |               |                                 |               |                    |     |     | M 1                         |               | 09 28 52 |     |             |     |
| 7. SCD                           |     | 8. CSC Perm.                |               | 9. CSC Or Other Legal Authority |               | 10. Appt. Affidav. |     |     | 11. FEGLI                   |               | 12. LCD  |     | 13. Other   |     |
| Mo.                              | Da. | Yr.                         | Yes-1<br>No-2 | Code                            |               |                    | Mo. | Da. | Yr.                         | Yes-1<br>No-2 | Code     | Mo. | Da.         | Yr. |
| 08                               | 06  | 42                          |               | 1                               | 50 USCA 403 d |                    |     |     |                             |               |          | 09  | 28          | 52  |

**PREVIOUS ASSIGNMENT**

|                                   |      |                    |  |        |  |                                  |  |           |                         |                   |  |                          |  |
|-----------------------------------|------|--------------------|--|--------|--|----------------------------------|--|-----------|-------------------------|-------------------|--|--------------------------|--|
| 14. Organizational Designations   |      |                    |  | Code   |  | 15. Location Of Official Station |  |           |                         | Station Code      |  |                          |  |
| DDP FE<br>FI CI STAFF             |      |                    |  | 5113   |  | WASH. D. C.                      |  |           |                         | 75013             |  |                          |  |
| 16. Dept. - Field                 |      | 17. Position Title |  |        |  | 18. Position No.                 |  | 19. Serv. |                         | 20. Occup. Series |  |                          |  |
| Dept. - 2<br>USHD - 4<br>Fgen - 6 | Code | I.O. FI STF CH     |  |        |  | 3448                             |  | GS        |                         | 0136.51           |  |                          |  |
| 21. Grade & Step                  |      | 22. Salary Or Rate |  | 23. SD |  | 24. Date Of Grade                |  |           | 25. PSI Due             |                   |  | 26. Appropriation Number |  |
| 14 5                              |      | \$ 11180           |  | 01     |  | Mo. Da. Yr.<br>09 28 52          |  |           | Mo. Da. Yr.<br>03 22 59 |                   |  | 8 3700 20                |  |

**ACTION**

|                      |  |      |  |                         |  |                      |  |      |  |                     |  |
|----------------------|--|------|--|-------------------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date           |  | 29. Type Of Employee |  | Code |  | 30. Separation Data |  |
| PROMOTION            |  | 30   |  | Mo. Da. Yr.<br>12 15 57 |  | REGULAR              |  | 01   |  |                     |  |

**PRESENT ASSIGNMENT**

|                                   |      |                    |  |        |  |                                  |  |           |                         |                   |  |                          |  |
|-----------------------------------|------|--------------------|--|--------|--|----------------------------------|--|-----------|-------------------------|-------------------|--|--------------------------|--|
| 31. Organizational Designations   |      |                    |  | Code   |  | 32. Location Of Official Station |  |           |                         | Station Code      |  |                          |  |
| DDP FE<br>FI CI STAFF             |      |                    |  | 5113   |  | WASH., D. C.                     |  |           |                         | 75013             |  |                          |  |
| 33. Dept. - Field                 |      | 34. Position Title |  |        |  | 35. Position No.                 |  | 36. Serv. |                         | 37. Occup. Series |  |                          |  |
| Dept. - 2<br>USHD - 4<br>Fgen - 6 | Code | I.O. FI STF CH     |  |        |  | 3448                             |  | GS        |                         | 0136.51           |  |                          |  |
| 38. Grade & Step                  |      | 39. Salary Or Rate |  | 40. SD |  | 41. Date Of Grade                |  |           | 42. PSI Due             |                   |  | 43. Appropriation Number |  |
| 15 1                              |      | \$ 11610           |  | 01     |  | Mo. Da. Yr.<br>12 15 57          |  |           | Mo. Da. Yr.<br>06 14 59 |                   |  | 8 3700 20                |  |

44. Remarks

**POSTED**  
*JS 1-5-58*



**SECRET**  
(When Filled In)

91077

| NOTIFICATION OF PERSONNEL ACTION |  |                             |  |  |  |                                 |  |  |                    |  |               |  |             |  |               |  |
|----------------------------------|--|-----------------------------|--|--|--|---------------------------------|--|--|--------------------|--|---------------|--|-------------|--|---------------|--|
| DMG                              |  |                             |  |  |  |                                 |  |  |                    |  |               |  |             |  |               |  |
| 1. Serial No.                    |  | 2. Name (Last-First-Middle) |  |  |  | 3. Date Of Birth                |  |  | 4. Vol. Prod.      |  | 5. Sex        |  | 6. CS-EOD   |  |               |  |
|                                  |  |                             |  |  |  | Mo. Da. Yr.                     |  |  | 10 Pr-1<br>10 Pr-2 |  | M 1           |  | Mo. Da. Yr. |  |               |  |
|                                  |  |                             |  |  |  |                                 |  |  |                    |  |               |  | 07 28 52    |  |               |  |
| 7. Date                          |  | 8. CSC, Reinst. Code        |  |  |  | 9. CSC Or Other Legal Authority |  |  | 10. Appt. Affidav. |  | 11. FEGLI     |  | 12. LCO     |  | 13. Emp. No.  |  |
| Mo. Da. Yr.                      |  | Yes-1<br>No-2               |  |  |  |                                 |  |  | Mo. Da. Yr.        |  | Yes-1<br>No-2 |  | Mo. Da. Yr. |  | Yes-1<br>No-2 |  |
| 08 06 42                         |  | 1                           |  |  |  | 50 USCA 403 J                   |  |  |                    |  | 07 28 52      |  |             |  | 2             |  |

**PREVIOUS ASSIGNMENT**

|   |  |                       |  |        |  |                                  |  |             |  |                          |  |
|---|--|-----------------------|--|--------|--|----------------------------------|--|-------------|--|--------------------------|--|
| 14. Organizational Designations           |  |                       |  | Code   |  | 15. Location Of Official Station |  |             |  | Station Code             |  |
| DDP FE<br>BRANCH 1<br>OFFICE OF THE CHIEF |  |                       |  |        |  | WASH. D. C.                      |  |             |  |                          |  |
| 16. Dept. - Field                         |  | 17. Position Title    |  |        |  | 18. Position No.                 |  | 19. Serv.   |  | 20. Occup. Series        |  |
| Dept - 2<br>USHD - 4<br>Prgn - 6          |  | AREA OPS OF DEP BR CH |  |        |  | 0110                             |  | GS          |  | 0136.01                  |  |
| 21. Grade & Step                          |  | 22. Salary Or Rate    |  | 23. SD |  | 24. Date Of Grade                |  | 25. PSI Due |  | 26. Appropriation Number |  |
| 14 5                                      |  | \$ 11180              |  | 01     |  | Mo. Da. Yr.                      |  | Mo. Da. Yr. |  | 8 3700 20                |  |

**ACTION**

|                      |  |      |  |               |  |                      |  |      |  |                     |  |
|----------------------|--|------|--|---------------|--|----------------------|--|------|--|---------------------|--|
| 27. Nature Of Action |  | Code |  | 28. Eff. Date |  | 29. Type Of Employee |  | Code |  | 30. Separation Data |  |
| REASSIGNMENT         |  | 56   |  | 12 05 57      |  | REGULAR              |  | 01   |  |                     |  |

**PRESENT ASSIGNMENT**

|  |  |                    |  |        |  |                                  |  |             |  |                          |  |
|--|--|--------------------|--|--------|--|----------------------------------|--|-------------|--|--------------------------|--|
| 31. Organizational Designations  |  |                    |  | Code   |  | 32. Location Of Official Station |  |             |  | Station Code             |  |
| DDP FE<br>FI CI STAFF  |  |                    |  | 5113   |  | WASH. D. C.                      |  |             |  | 75013                    |  |
| 33. Dept. - Field  |  | 34. Position Title |  |        |  | 35. Position No.                 |  | 36. Serv.   |  | 37. Occup. Series        |  |
| Dept - 2<br>USHD - 4<br>Prgn - 6   |  | I.O. FI STF CH     |  |        |  | 3448                             |  | GS          |  | 0136.51                  |  |
| 38. Grade & Step   |  | 39. Salary Or Rate |  | 40. SD |  | 41. Date Of Grade                |  | 42. PSI Due |  | 43. Appropriation Number |  |
| 14 5   |  | \$ 11180           |  | 01     |  | 02 122 152                       |  | 03 122 152  |  | 8 3700 20                |  |
| 44. Remarks  |  |                    |  |        |  |                                  |  |             |  |                          |  |
| <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>POSTED</p> <p>DP 12/2/57</p> </div> |  |                    |  |        |  |                                  |  |             |  |                          |  |

SECRET  
(WHICH FILLED IN)

|  |      |          |                     |           |     |                    |      |          |                |              |     |
|--|------|----------|---------------------|-----------|-----|--------------------|------|----------|----------------|--------------|-----|
| 1. EMP. SERIAL NO.   |      | 2. NAME  |                     |           |     | 3. ASSIGNED ORGAN. |      | 4. FUNDS |                | 5. ALLOTMENT |     |
|  |      |          |                     |           |     | DDP/FE 5           |      | V-20     |                |              |     |
| 6. OLD SALARY RATE   |      |          |                     |           |     | 7. NEW SALARY RATE |      |          |                |              |     |
| GRADE  | STEP | SALARY   | LAST EFFECTIVE DATE |           |     | GRADE              | STEP | SALARY   | EFFECTIVE DATE |              |     |
|  |      |          | MO.                 | DA.       | YR. |                    |      |          | MO.            | DA.          | YR. |
| 14   | 4    | \$10,965 | 03                  | 25        | 56  | 14                 | 5    | \$11,180 | 09             | 22           | 57  |
| REMARKS  |      |          |                     |           |     |                    |      |          |                |              |     |
|  |      |          |                     |           |     |                    |      |          |                |              |     |
| CERTIFICATION  |      |          |                     |           |     |                    |      |          |                |              |     |
| I CERTIFY THAT THE SERVICE AND CONDUCT OF THE ABOVE NAMED EMPLOYEE ARE SATISFACTORY. |      |          |                     |           |     |                    |      |          |                |              |     |
| TYPED OR PRINTED NAME OF SUPERVISOR  |      |          |                     | DATE      |     | SIGNATURE          |      |          |                |              |     |
|  |      |          |                     | 14 Aug 57 |     |                    |      |          |                |              |     |
| PERIODIC STEP INCREASE - CERTIFICATION   |      |          |                     |           |     |                    |      |          |                |              |     |

FORM NO. 560  
1 MAR 55

SECRET

PERSONNEL FOLDER (41)

SECRET  
(WHICH FILLED IN)

|   |      |          |                     |     |     |  |      |          |                |              |     |
|---|------|----------|---------------------|-----|-----|--|------|----------|----------------|--------------|-----|
| 1. EMP. SERIAL NO.  |      | 2. NAME  |                     |     |     | 3. ASSIGNED ORGAN.                           |      | 4. FUNDS |                | 5. ALLOTMENT |     |
|   |      |          |                     |     |     | DDP/FE                                       |      | V-20     |                |              |     |
| 6. OLD SALARY RATE  |      |          |                     |     |     | 7. NEW SALARY RATE                           |      |          |                |              |     |
| GRADE   | STEP | SALARY   | LAST EFFECTIVE DATE |     |     | GRADE  | STEP | SALARY   | EFFECTIVE DATE |              |     |
|   |      |          | MO.                 | DA. | YR. |  |      |          | MO.            | DA.          | YR. |
| 14  | 4    | \$10,965 | 03                  | 25  | 56  | 14   | 5    | \$11,180 | 09             | 22           | 57  |
| TO BE COMPLETED BY THE OFFICE OF COMPTROLLER  |      |          |                     |     |     |  |      |          |                |              |     |
| 9. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP  |      |          |                     |     |     | 10. NUMBER OF HOURS LWOP                     |      |          |                |              |     |
| IF EXCESS LEAVE LWOP, CHECK FOLLOWING:<br><input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD<br><input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD |      |          |                     |     |     | 11. AUDITED BY                               |      |          |                |              |     |
|   |      |          |                     |     |     | 12. PROJECTED SALARY RATE AND EFFECTIVE DATE |      |          |                |              |     |
| GRADE   | STEP | SALARY   | NO.                 | DA. | YR. | 13. REMARKS                                  |      |          |                |              |     |
|   |      |          |                     |     |     |  |      |          |                |              |     |
| 14. AUTHENTICATION  |      |          |                     |     |     |  |      |          |                |              |     |
|   |      |          |                     |     |     |  |      |          |                |              |     |
| PERIODIC STEP INCREASE - AUTHENTICATION   |      |          |                     |     |     |  |      |          |                |              |     |

FORM NO. 560B  
1 MAR 55

SECRET

PERSONNEL FOLDER (41)



STANDARD FORM 52  
 REQUEST FOR PERSONNEL ACTION

UNVOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

|   |                  |   |                                      |
|---|------------------|---|--------------------------------------|
| 1. NAME (Mr., Miss, Mrs.—One given name, initials, and surname)   | 2. DATE OF BIRTH | 3. REQUEST NO.  | 4. DATE OF REQUEST<br>2 May 56       |
| 5. NATURE OF ACTION REQUESTED:<br>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)<br>Reassignment |                  | 6. EFFECTIVE DATE<br>A. PROPOSED:<br>B. APPROVED:<br>JUN 3 1956 | 7. C. S. OR OTHER<br>LEGAL AUTHORITY |
| 8. POSITION (Specify whether establish, change grade or title, etc.)  |                  |   |                                      |

|  |  |   |
|--|--|---|
| FROM—<br><br>Deputy for FI<br>Operations Staff                       | 9. POSITION TITLE AND NUMBER<br>OFF 2302 | 10. TO—<br>I.O. (FI) BPP-2302-14<br>GS-0136.51-14 \$10,965.00 p/a<br>DDP/FE<br>Branch 1<br>Operations Staff |
| <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL | 11. ORGANIZATIONAL DESIGNATIONS          | <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL SD: DI                      |
| 12. FIELD OR DEPARTMENTAL  |  |   |

A. REMARKS (Use reverse if necessary)

T/O Change

|   |                   |                               |             |
|---|-------------------|-------------------------------|-------------|
| B. [Signature]  | PERSONNEL OFFICER | D. REQUEST                    | [Signature] |
| C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) |                   | Title: <i>Edema 7 May '56</i> |             |

|  |  |         |
|--|--|---------|
| 13. VETERAN PREFERENCE   | 14. POSITION CLASSIFICATION ACTION   | SD: DIO |
| NONVET: <input type="checkbox"/> MAIL <input type="checkbox"/> OTHER: <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT | NEW: <input type="checkbox"/> VICE <input type="checkbox"/> I.A. <input type="checkbox"/> REAL |         |
| DISAB: <input type="checkbox"/> OTHER  |  |         |

|         |                   |  |   |   |
|---------|-------------------|--|---|---|
| 15. SEX | 16. APPROPRIATION | 17. SUBJECT TO C. S. REFINEMENT ACT (YES—NO) | 18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | 19. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED |
|---------|-------------------|--|---|---|

20. STANDARD FORM 10 REMARKS

**SCOTTED**  
MAR 1956

USED IN LIEU OF SF50  
POST OFFICE OF PERSONNEL  
ACTION

|                         |                      |      |         |
|-------------------------|----------------------|------|---------|
| 21. CLEARANCES          | INITIAL OR SIGNATURE | DATE | REMARKS |
| A.                      |                      |      |         |
| B. CEIL. ON POS CONTROL | <i>WLR</i>           |      |         |
| C. CLASSIFICATION       |                      |      |         |
| D. PLACEMENT OR EMPL.   | <i>WLR 5/1/56</i>    |      |         |
| E.                      |                      |      |         |

F. [Signature]

*10 May '56*

PERIODIC STEP INCREASE CERTIFICATION

(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1974-330030

| 1. Agency and organizational designation   |          | 2. Payroll period                        |           | 3. Dist. No.<br>JV | 4. Slip No. |   |             |  |                 |                                    |  |
|--|----------|--|-----------|--------------------|-------------|---|-------------|--|-----------------|------------------------------------|--|
| account number when appropriate  |          | 4. Grade and salary<br>GS-14 \$10,750.00 |           |                    |             |   |             |  |                 |                                    |  |
| PAYROLL CHANGE DATA  |          |  |           |                    |             |   |             |  |                 |                                    |  |
| 7. Previous normal   | BASE PAY | OVERTIME                                 | GROSS PAY | RET.               | FEDERAL TAX | BOND  | F. L. C. A. | STATE TAX  | GROUP LIFE INS. | NET PAY                            |  |
| 8. New normal  |          |  |           |                    |             |   |             |  |                 |                                    |  |
| 9. Pay this period   |          |  |           |                    |             |   |             |  |                 |                                    |  |
| 10. Remarks  |          |  |           |                    |             | 11. Appropriation(s)<br>FE/5  |             | 12. Prepared by<br>afw 1/10  |                 |                                    |  |
| 14. Effective date<br>25 Mar 56  |          |  |           |                    |             | 15. Date last approved<br>26 Sep 54                                 |             | 16. Old salary rate<br>\$10,750.00   |                 | 17. New salary rate<br>\$10,965.00 |  |
| 18. LWOP data (fill in appropriate spaces covering LWOP during following periods)  |          |  |           |                    |             | AA For summary of performance, service and conduct are satisfactory |             | <input type="checkbox"/> Periodic step increase<br><input type="checkbox"/> Pay adjustment<br><input type="checkbox"/> Other step increase   |                 |                                    |  |
| <input checked="" type="checkbox"/> No excess LWOP. Total excess LWOP              |          |  |           |                    |             | (Signature of)  |             | (Check applicable box in case of excess LWOP)<br><input type="checkbox"/> In excess of 30 days<br><input type="checkbox"/> In excess of 60 days<br><input type="checkbox"/> In excess of 90 days<br><input type="checkbox"/> In excess of 120 days<br><input type="checkbox"/> In excess of 150 days<br><input type="checkbox"/> In excess of 180 days<br><input type="checkbox"/> In excess of 210 days<br><input type="checkbox"/> In excess of 240 days<br><input type="checkbox"/> In excess of 270 days<br><input type="checkbox"/> In excess of 300 days<br><input type="checkbox"/> In excess of 330 days<br><input type="checkbox"/> In excess of 360 days<br><input type="checkbox"/> In excess of 390 days<br><input type="checkbox"/> In excess of 420 days<br><input type="checkbox"/> In excess of 450 days<br><input type="checkbox"/> In excess of 480 days<br><input type="checkbox"/> In excess of 510 days<br><input type="checkbox"/> In excess of 540 days<br><input type="checkbox"/> In excess of 570 days<br><input type="checkbox"/> In excess of 600 days |                 |                                    |  |
| STANDARD FORM NO. 1125-Rev. 1954   |          |  |           |                    |             | CONFIDENTIAL  |             | PAYROLL CHANGE SLIP — PERSONNEL COPY   |                 |                                    |  |
| Form prescribed by Comp. Gen., U. S. October 14, 1954, General Regulations No. 102 |          |  |           |                    |             |   |             | Initials of Clerk<br>WAW   |                 |                                    |  |

UNVOUCHERED

*F. J. ...*  
 1/24/55  
*John*

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

|  |                  |                                   |                                      |
|--|------------------|-----------------------------------|--------------------------------------|
| 1. NAME (Mr.—Miss—Mrs.—One given name, initial(s), and surname)<br>15.5a   | 2. DATE OF BIRTH | 3. REQUEST NO.                    | 4. DATE OF REQUEST<br>20 Dec 54      |
| 5. NATURE OF ACTION REQUESTED:<br>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)<br><b>Reassignment</b> |                  | 6. EFFECTIVE DATE<br>A. PROPOSED: | 7. C. S. OR OTHER<br>LEGAL AUTHORITY |
| B. POSITION (Specify whether establish, change grade or title, etc.)   |                  | B. APPROVED:<br>JAN 16 1955       |                                      |

|  |   |   |
|--|---|---|
| FROM— I.O. (FI) BFF-459<br>GS-0136.51-14 \$9800.00 p/a<br>DDP/FE 19 000.00<br>Military Element<br>Office of the Deputy Chief | 8. POSITION TITLE AND NUMBER<br>9. SERVICE, GRADE, AND SALARY<br>10. ORGANIZATIONAL DESIGNATIONS<br>11. HEADQUARTERS<br>12. FIELD OR DEPARTMENTAL | TO— I.O. (FI) BFF-2302-14<br>GS-0136.51-14 \$9800.00 p/a<br>DDP/FE 19 000.00<br>Deputy for FI<br>Operations Staff |
| <input checked="" type="checkbox"/> FIELD  | <input type="checkbox"/> DEPARTMENTAL   | <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL                                   |

A. REMARKS (Use reverse if necessary)  
 PROMOTION TO FBI EXECUTIVE  
 SALARY ADJUSTED TO: 10750

13. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)  
 Avis M. Tallackson - x-3332

|  |   |
|--|---|
| 13. VETERAN PREFERENCE<br>NONE WWII OTHER 5-PT. 10 POINT<br>DISAB. OTHER | 14. POSITION CLASSIFICATION ACTION<br>NEW VICE I. A. REAL |
|--|---|

|              |               |  |   |   |                                      |
|--------------|---------------|--|---|---|--------------------------------------|
| 15. SEX<br>M | 16. RACE<br>W | 17. APPROPRIATION<br>FROM: 5-3735-55-005<br>TO: Same | 18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)<br>Yes | 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | 20. LEGAL RESIDENCE<br>STATE: W. Va. |
|--------------|---------------|--|---|---|--------------------------------------|

21. STANDARD FORM 50 REMARKS  
 ATTACHED BY  
 FI OFFICE CONTROL UNIT  
 1 Jan '55  
 1/24/55

|                          |                      |         |         |
|--------------------------|----------------------|---------|---------|
| 22. CLEARANCES           | INITIAL OR SIGNATURE | DATE    | REMARKS |
| A.                       |                      |         |         |
| B. CEIL. OR POS. CONTROL | PC/H                 | 1/10/55 |         |
| C. CLASSIFICATION        |                      |         |         |
| D. PLACEMENT OR EMPL.    |                      |         |         |
| E.                       |                      |         |         |

F. APPROVED BY: *[Signature]*

1-14-55 Rec'd

| 1. Agency and organizational designations   |      | 2. Pay roll # |      | 3. Sheet No.<br>UV   |      | 4. Sheet No.  |         |
|---|------|---------------|------|--|------|---|---------|
| [Blank]   |      | [Blank]       |      | 5. Grade and salary<br>GS-11, \$9000   |      | [Blank]   |         |
| PAY ROLL CHANGE DATA  |      |               |      |  |      |   |         |
|   | BASE | OV            | TIME | GROSS PAY  | RET. | TAX   | NET PAY |
| 7. Previous normal  |      |               |      |  |      |   |         |
| 8. New normal   |      |               |      |  |      |   |         |
| 9. Pay this period  |      |               |      |  |      |   |         |
| 10. Remarks<br>INVOICE DIVISION   |      |               |      | 11. Appropriation<br>FBI   |      | 12. Prepared by<br>12 Aug 53  |         |
| 13. Periodic step increase <input checked="" type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase <input type="checkbox"/> |      |               |      | 14. Effective date<br>26 Sep 53  |      | 15. Date last equivalent rate<br>27 Mar 53                                |         |
| 16. Old salary rate<br>\$9800   |      |               |      | 17. New salary rate<br>\$10,000  |      | 18. Performance rating is satisfactory or better <input type="checkbox"/> |         |
| 19. LWOP data (Fill in appropriate spaces covering LWOP during following period(s))   |      |               |      | [Signature or other authentication]  |      |   |         |
| <input type="checkbox"/> No access LWOP. Total access LWOP  |      |               |      | <input type="checkbox"/> No pay status during LWOP period.<br><input type="checkbox"/> LWOP status during LWOP period. |      |   |         |
| STANDARD FORM NO. 11263-Rev. 11-5-53<br>Form prescribed by Comp. Gen., U. S.<br>Nov. 8, 1950, General Regulation No. 122                            |      |               |      | PAY ROLL CHANGE SLIP—PERSONNEL COPY  |      |   |         |

STANDARD FORM 52  
 PREPARED BY THE  
 U. S. GOVERNMENT PRINTING OFFICE  
 WASHINGTON, D. C. 20540  
 FEDERAL CHAPTER 51

**REQUEST FOR PERSONNEL ACTION**

UNVOUCHERED

2300  
 2/17/54  
 1/4

**REQUESTING OFFICE:** Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

|   |                  |                                |                                    |
|---|------------------|--------------------------------|------------------------------------|
| 1. NAME (Mr. - Miss - Mrs - One given name, initial(s), and surname)                                      | 2. DATE OF BIRTH | 3. REQUEST NO.                 | 4. DATE OF REQUEST                 |
|   |                  |                                | 5 Feb 54                           |
| 5. NATURE OF ACTION REQUESTED:<br>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) |                  | 6. EFFECTIVE DATE A. PROPOSED: | 7. C.S. OR OTHER (LEGAL AUTHORITY) |
| Reassignment  |                  | 28 Feb 1954                    |                                    |
| 8. POSITION (Specify whether establish, change grade or title, etc.)                                      |                  | B. APPROVED:<br>FEB 28 1954    |                                    |

|   |                                 |   |
|---|---------------------------------|---|
| FROM— I.O. (Ops) S-7<br>GS-132-14 \$9800.00 p/a<br>DDP/FE<br>Military Element<br>Office of the Deputy Chief | 9. POSITION TITLE AND NUMBER    | 10— I.O. (FI) BFR-459<br>GS-0136-51-14 \$9800.00 p/a                            |
|   | 10. SERVICE GRADE AND SALARY    | Same  |
|   | 11. ORGANIZATIONAL DESIGNATIONS | Same  |
|   | 12. HEADQUARTERS                | Same  |
| <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL                             | 13. FIELD OR DEPARTMENTAL       | <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL |

A. REMARKS (Use reverse if necessary)

|   |   |
|---|---|
| B. REQUESTED BY (Name and title)  | C. REQUEST APPROVED                                   |
|   | Signature: [Signature]<br>Title: FE Personnel Officer |
| D. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)<br>X-3332 |   |

|  |  |
|--|--|
| 13. VETERAN PREFERENCE   | 14. POSITION CLASSIFICATION ACTION   |
| NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> S.P.T. <input checked="" type="checkbox"/> 5 POINT<br>DISAB. <input type="checkbox"/> OTHER <input type="checkbox"/> | NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/><br>CD: FI |

|   |  |  |   |   |
|---|--|--|---|---|
| 15. SEX (MALE <input checked="" type="checkbox"/> FEMALE <input type="checkbox"/><br>N <input checked="" type="checkbox"/> W <input type="checkbox"/> | 16. APPROPRIATION<br>FROM: 3735-55-005<br>TO: SAME | 18. SUBJECT TO U.S. RETIREMENT ACT (YES-NO)<br>Yes | 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | 20. LEGAL RESIDENCE<br><input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED<br>STATE: |
|---|--|--|---|---|

21. STANDARD FORM 50 REMARKS

POSTED

[Signature]

|                          |                       |           |         |
|--------------------------|-----------------------|-----------|---------|
| 22. CLEARANCES           | INITIALS OR SIGNATURE | DATE      | REMARKS |
| A.                       |                       |           |         |
| B. CEIL. OR POS. CONTROL | Jm                    | 17 FEB 54 |         |
| C. CLASSIFICATION        |                       |           |         |
| D. PLACEMENT OR EMPL.    | [Signature]           | 17 FEB 54 |         |
| E.                       |                       |           |         |

F. APPROVED BY: [Signature] [Signature]



STANDARD FORM 52  
PREPARED BY THE  
U. S. CIVIL SERVICE COMMISSION  
FOR USE BY FEDERAL PERSONNEL  
AGENCIES (LIMITED USE)

### REQUEST FOR PERSONNEL ACTION

EMPLOYER'S USE ONLY

*200000*  
*6/15/53*  
*PT*

REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

|   |                  |                                   |                                     |
|---|------------------|-----------------------------------|-------------------------------------|
| 1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)  | 2. DATE OF BIRTH | 3. REQUEST NO.                    | 4. DATE OF REQUEST<br>6 May 53      |
| 5. NATURE OF ACTION REQUESTED:<br>A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)<br>Reassignment |                  | 6. EFFECTIVE DATE<br>A. PROPOSED: | 7. C.S. OR OTHER<br>LEGAL AUTHORITY |
| 8. POSITION (Specify whether establish, change grade or title, etc.)  |                  | B. APPROVED:<br>JUN 7 1953        |                                     |

|   |   |   |
|---|---|---|
| FROM: I.O. <i>3-1</i><br><i>CS-14</i><br>BOP/PA<br>OPC Team | 9. POSITION TITLE AND NUMBER<br><i>v. 810</i> | TO: I.O. <i>(OPC)</i><br><i>CS-14-14</i><br>BOP/PA<br>Military Element<br>Officer of the Deputy Chief |
| 10. SERVICE, GRADE, AND SALARY                              | 11. ORGANIZATIONAL DESIGNATIONS               | 12. HEADQUARTERS  |
| 13. FIELD OR DEPARTMENTAL                                   | 14. FIELD OR DEPARTMENTAL                     | 15. FIELD OR DEPARTMENTAL   |

A. REMARKS (Use reverse if necessary)  
From JCU, OPC Team Slot #1 (class 810) *FE-1*  
Subject entered on duty in the field 28 Sept 1952  
DATE: MAY 21 1953

APPROVED BY  
FI CAREER SERVICE BOARD

|   |  |
|---|--|
| B. REQUESTED BY<br>Personnel Officer                              | D. REQUEST APPROVED BY<br>Signature: [Signature]<br>Title: <i>FI/CHO</i> |
| C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) |  |

|  |  |  |   |   |   |
|--|--|--|---|---|---|
| 13. VETERAN PREFERENCE<br>NONE <input type="checkbox"/> WITH OTHER <input checked="" type="checkbox"/> 5 PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/><br>DISAB. OTHER <input type="checkbox"/> | 14. POSITION CLASSIFICATION ACTION<br>NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> |  |   |   |   |
| 15. SEX <i>M</i>   | 16. RACE <i>M</i>  | 17. APPROPRIATION<br>FROM: <i>2735-55-005</i><br>TO: <i>5000</i> | 18. SUBJECT TO U.S. RETIREMENT ACT (YES-NO) | 19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY) | 20. LEGAL RESIDENCE STATE<br><input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED |

21. STANDARD FORM 50 REMARKS  
*W*

**POSTED**  
*[Signature]*

| 22. CLEARANCES           | INITIAL OR SIGNATURE | DATE | REMARKS |
|--------------------------|----------------------|------|---------|
| A.                       |                      |      |         |
| B. CEIL. OR POS. CONTROL |                      |      |         |
| C. CLASSIFICATION        |                      |      |         |
| D. PLACEMENT OR EMPL.    |                      |      |         |
| E.                       |                      |      |         |

19-5720-2

**SECRET**  
SECURITY INFORMATION

|  |  |  |                                      |  |  |      |                |  |         |
|--|--|--|--------------------------------------|--|--|------|----------------|--|---------|
| 1. Agency and organizational designations<br><b>CENTRAL INTELLIGENCE AGENCY</b>  |  | 2. Pay roll                                  | 3. Check No.<br><b>117</b>           | 4. Slip No.  |  |      |                |  |         |
| 5. Employee's name (and social security account number when appropriate)   |  | 6. Grade and salary<br><b>GS - 14 \$9600</b> |                                      |  |  |      |                |  |         |
| <b>PAY ROLL CHANGE DATA</b>  |  |  |                                      |  |  |      |                |  |         |
|  | BASE PAY                                     | OVERTIME                                     | GROSS PAY                            | RET.   | TAX  | BOND | F.I.C.A.       |  | NET PAY |
| 7. Previous normal   |  |  |                                      |  |  |      |                |  |         |
| 8. Now normal  |  |  |                                      |  |  |      |                |  |         |
| 9. Pay this period   |  |  |                                      |  |  |      |                |  |         |
| 10. Remarks:<br><br><b>Delay due to admin error</b>  |  | 11. Appropriation(s)<br><br><b>YK 03</b>     |                                      |  | 12. Prepared by<br><b>5/7/53</b>           |      | 13. Audited by |  |         |
| <input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase              |  |  |                                      |  |  |      |                |  |         |
| 14. Effective date<br><b>29 MAR 53</b>   | 15. Date last equivalent<br><b>30 MAR 53</b> | 15. Old salary rate<br><b>\$9600</b>         | 17. New salary rate<br><b>\$9600</b> | 18. Performance rating is satisfactory or better.<br><br>Signature or other authentication   |  |      |                |  |         |
| 19. LWOP data fill in appropriate spaces covering LWOP during following periods:<br>Period(s):<br><input type="checkbox"/> No excess LWOP. Total excess LWOP |  |  |                                      | <input type="checkbox"/> (Check applicable box in case of excess LWOP)<br><input type="checkbox"/> pay status at end of mailing period<br><input type="checkbox"/> on LWOP status at end of mailing period |  |      |                |  |         |
| <b>STANDARD FORM NO. 11204-Rev. 12-52</b><br>Form prescribed by Comp. Gen., U. S.<br>Nov. 3, 1950, General Regulation No. 102                                |  |  |                                      |  | <b>PAY ROLL CHANGE SLIP—PERSONNEL COPY</b> |      |                |  |         |

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

*10/21/52*  
*989*

|                  |                      |                |                       |
|------------------|----------------------|----------------|-----------------------|
| NAME             | [Redacted]           | DATE           | 15 July 1952          |
| NATURE OF ACTION | Excepted Appointment | EFFECTIVE DATE | 23 Sept. 52           |
| TITLE            | FROM                 | TO             | I.O.                  |
| GRADE AND SALARY |                      |                | GS-14 89600           |
| OFFICE           |                      |                | OSO                   |
| DIVISION         |                      |                | FE                    |
| BRANCH           |                      |                | C - OFC Team, Slot #1 |
| OFFICIAL STATION |                      |                | [Redacted] 3739       |

|          |            |           |            |
|----------|------------|-----------|------------|
| APPROVAL | [Redacted] | EXECUTIVE | [Redacted] |
|----------|------------|-----------|------------|

POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS  YES  NO

OATH OF OFFICE AND NO-STRIKE AFFIDAVIT EXECUTED ON 23 Sept. 52

SECURITY CLEARED ON 28 July 52

OVERSEAS AGREEMENT SIGNED 23 Sept. 52

ENTERED ON DUTY 23 Sept. 52

DOG 07/28/52  
 CSEOD 07/28/52  
 LCD 07/28/52

**FOOTNOTED**  
*In 22 Oct 52*

REMARKS: Request subject be processed against [Redacted], OFC Team Slot #1 (I.O., GS-14), Personnel No. 427. This action supersedes request for appointment dated 2 November 1951. Resubmitted in accordance with [Redacted] 0106 (IN 15330), dtd 30 Jun 52; WAGE 48690 (OUT 88734), dtd 7 Jul 52; [Redacted] 0111 (IN 17577), dtd 9 July 52. Request that subject's security clearance be held open to permit him to EOD o/a 1 Sept 52.

Allot. #3739

N.B.

*Collection that subject is now in P. 14*

8 May 1973

MEMORANDUM IN LIEU OF FITNESS REPORT FORM

Name: [REDACTED]  
Date of Birth: [REDACTED]  
Sex: Male  
Grade: GS-17  
SD: D  
Official Position Title: Ops Officer - Staff Chief  
Current Station: Headquarters  
Type of Report: Annual  
Reporting Period: 1 April 1972 - 8 May 1973

During the past reporting period Mr. Wheeler has served his first full year as Chief of the newly-created [REDACTED]. He has worked hard and long to improve and simplify the procedures through which we recruit, train, and deploy our [REDACTED] personnel. He has identified accurately the bureaucratic roadblocks that stand in the way of our efficient use of [REDACTED] and if he has not succeeded in removing these barriers he has made some progress. His enthusiasm for the job and his belief that it can be done have been invaluable during a formative period, and his performance on the whole has been a strong one.

[REDACTED]  
Cord Meyer, Jr.

Associate Deputy Director for Operations

I have noted this report:

[REDACTED]

4/20/73  
Date

E 2 IMPDET  
[REDACTED]

15 JUL 1973  
119

SECRET

Fitness Report - [redacted]

COMMENTS OF REVIEWING OFFICIAL: *Coward - O*  
*committed and effective performance -*

[redacted]

8 JUL 1973

Date

W.E. Colby, Deputy Director for Operations

SECRET

30 May 1972

MEMORANDUM IN LIEU OF FITNESS REPORT FORM

Name: [redacted]  
Date of birth: [redacted]  
Sex: Male  
Grade: GS-17  
SD: D  
Official position title: Ops Officer - Staff Chief  
Current station: Headquarters  
Type of report: Annual  
Reporting period: 21 March 1971 - 31 March 1972

During the first part of the reporting period, [redacted] served as Chief, Missions and Programs Staff, and on 17 January 1972 he assumed his new duties as Chief, [redacted]. As Chief, MPS, [redacted] effectively supervised the important planning and budgetary functions of that office and under his leadership the Clandestine Service has considerably improved its programming presentations to the 7th floor and, due to the effective staff work and [redacted] guidance, the area divisions have been largely relieved of the many questionnaires and interventions with which they were once plagued.

[redacted] took over his new duties as Chief, [redacted] with enthusiasm and his wide field experience and good relationships with the area divisions should in the future bring about a much more secure and imaginative employment of our [redacted]

6 JUN 1972  
lof

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[redacted] personnel. Unfortunately a heart attack during the past year slowed [redacted] down for a while but he has made a good recovery and his performance on the whole has been very strong.

[redacted]

Cord Meyer, Jr.  
Assistant Deputy Director for Plans

I have noted this report:

5/30/72  
Date

[redacted]

Comments of reviewing official:

*Fully correct.*

31 May 72  
Date

[redacted]

Thomas H. Karamezines  
Deputy Director for Plans

SECRET

SECRET

16 February 1971

MEMORANDUM FOR: Director of Personnel  
SUBJECT: Fitness Report (Special) -  
[redacted]

1. This memorandum is submitted in lieu of the Fitness Report form to cover the performance of [redacted] from 1 March 1970 through February 1971. It is submitted as the final report of the Rating Officer who is retiring at the end of February 1971.

2. [redacted] outstanding characteristics are his integrity and total dedication to the continuing upgrading of management within the CS at all levels. By background, interest and training; by service in OPPE; by full-time participation in the Federal Executive Institute; and by his abiding determination to instill others with a similar will for perfection within the CS, he has made a valuable contribution to the Missions and Programs Staff (MPS) and to the Clandestine Services.

3. As chief of the Program Review Panel he has chaired the hearings of the various divisions with a great degree of sensitivity and knowledge, and has upgraded the quality and substance of those hearings. He has been especially helpful in those instances where divisions have proposed new approaches, as well as in the development of new and effective management techniques designed to simplify control and to coordinate the activities of headquarters elements and field stations.

4. [redacted] is a natural leader, bright and original. His is a creative mind, and innovative. He is articulate, rational, and thinks and talks sequentially. He has demonstrated clearly his ability to instill enthusiasm and continuing effort on the part of his subordinate officers who, taking their cue from him, are thoughtful, energetic and hard working. His officers demonstrate very high morale and great enjoyment and satisfaction in their work.

25 FEB 1971

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5. [redacted] also has the gift of being able to absorb rapidly and commit to paper accurately and quickly, a characteristic and asset of his which has much to commend it.

6. He has been a superb deputy, acting in this capacity in my absence. He has excellent recall, is a gifted administrator, and has introduced a number of procedural changes that have increased MPS effectiveness. He has been effective in dealing with OPPB and in participation in the briefings of Office of Management and Budget (OMB) personnel. He is very cost conscious and has made several suggestions resulting in the saving of hundreds of thousands of dollars. [redacted] has always enthusiastically accepted assignments to panels designed to upgrade the quality of various trouble areas, the latest being the searching look into the [redacted] situation within the CS.

7. [redacted] is a searching individual who is totally committed to the Plans Directorate and has the high regard of most of the elements comprising the Clandestine Services.

8. As I have previously recommended, I believe [redacted] would make an outstanding Chief of the Missions and Programs Staff.

[redacted]

Chief, Missions and Programs Staff

I have noted the above report:

[redacted]

Robert P. Wheeler

2/16/71  
Date

Reviewing Official: Cord Meyer

[redacted]

Cord Meyer, Jr.  
Assistant Deputy Director for Plans

18 Feb 71  
Date

SECRET

SECRET

9 February 1970

MEMORANDUM FOR: Director of Personnel

SUBJECT: Fitness Report (Special) -  
[redacted]

060747-6514 - M/S - D

1. This memorandum is submitted in lieu of the Fitness Report form to cover the performance of [redacted] from 1 April 1969 to February 1970. It is submitted as a Special Fitness Report to serve as the final report of the Rating Officer who is retiring at the end of February 1970.

2. As Chief of the Programs Group (PRG) of the Missions and Programs Staff, [redacted] is responsible for, inter alia, liaison, except on budgetary matters, between the CS and OPPB; installing the Planning, Programming and Budgeting System (PPBS) within the CS; advising and assisting CS components in the preparation of Operating Directives and the program portions of the annual Operating Program response; chairing the Program Review Panel; preparing and/or coordinating special studies and surveys on operational programs; preparing DDP responses to requests of the Executive Director-Comptroller on CS programs, etc.; and, as required, advising CS components on those requirements of the PPBS that need to be addressed in CS documents requiring DCI or Executive Director-Comptroller action.

3. In carrying out the above-stated functions Mr. [redacted] has continued his superb performance in the field of management. His unusual dedication and sensible approach to and great enthusiasm for the tenets of PPBS have contributed immensely to the system's installation in the Clandestine Service. His energy, logical reasoning and sincerity have infected his numerous contacts within the CS and are goals which his officer-subordinates are striving to attain. He is so strong in his determination that good management will prevail in all components of the CS that he

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has never passed up an opportunity informally to discuss PPBS, to lecture at formal courses and to assist the DDP/TRO in his exhortations for management training. He has been a strong leader as Chairman of the Program Review Panel and supervisor of his subordinates. He has been outstanding in his ability rapidly to gather facts and produce a document in response to program and management queries levied on MPS. His wide CS experience, affability, sincerity, intelligence and dedication to the missions of the Agency, all of which have continued to be in evidence during the reporting period, make [redacted] in the opinion of the Rating Officer, one of the CS' most valuable officers.

[redacted]

Chief, Missions and Programs Staff

I have noted the above report:

[redacted]

2/10/70  
Date

Reviewing Official:

*Cover*

[redacted]

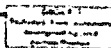
Cord Meyer, Jr.  
Assistant Deputy Director for Plans

10 Feb 70  
Date

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**SECRET**  
(When Filled In)

| FITNESS REPORT  |                                  |   |   | EMPLOYEE SERIAL NUMBER                           |  |
|---|----------------------------------|---|---|--|--|
|   |                                  |   |   | 060947   |  |
| <b>SECTION A GENERAL</b>  |                                  |   |   |  |  |
| 1. NAME (Last) _____ (Middle) _____   |                                  | 3. SEX  | 4. GRADE  | 5. SD  |  |
|   |                                  | M   | GS-16   | D  |  |
| 6. OFFICIAL POSITION TITLE<br><b>Ops Officer</b>  |                                  | 7. OFF/DIV/BR OF ASSIGNMENT<br><b>DDP/MPS/PRG</b> | 8. CURRENT STATION<br><b>Hqs</b>  |  |  |
| 9. CHECK (X) TYPE OF APPOINTMENT  |                                  |   | 10. CHECK (X) TYPE OF REPORT  |  |  |
| <input checked="" type="checkbox"/> CAREER  | <input type="checkbox"/> RESERVE | <input type="checkbox"/> TEMPORARY                | <input type="checkbox"/> INITIAL  | <input type="checkbox"/> REASSIGNMENT SUPERVISOR | <input type="checkbox"/> REASSIGNMENT EMPLOYEE |
| <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)  |                                  |   | <input checked="" type="checkbox"/> ANNUAL                                |  |  |
| <input type="checkbox"/> SPECIAL (Specify) _____  |                                  |   | <input type="checkbox"/> SPECIAL (Specify) _____                          |  |  |
| 11. DATE REPORT DUE IN O.P.<br><b>30 April 1969</b>   |                                  |   | 12. REPORTING PERIOD (From - to)<br><b>1 January 1968 - 31 March 1969</b> |  |  |
| <b>SECTION B PERFORMANCE EVALUATION</b>   |                                  |   |   |  |  |
| <p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p> |                                  |   |   |  |  |
| <b>SPECIFIC DUTIES</b>  |                                  |   |   |  |  |
| List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).  |                                  |   |   |  |  |
| SPECIFIC DUTY NO. 1<br><br><b>SEE ATTACHED</b>  |                                  |   |   |  | RATING LETTER                                  |
| SPECIFIC DUTY NO. 2   |                                  |   |   |  | RATING LETTER                                  |
| SPECIFIC DUTY NO. 3   |                                  |   |   |  | RATING LETTER                                  |
| SPECIFIC DUTY NO. 4   |                                  |   |   |  | RATING LETTER                                  |
| SPECIFIC DUTY NO. 5   |                                  |   |   |  | RATING LETTER                                  |
| SPECIFIC DUTY NO. 6   |                                  |   |   |  | RATING LETTER                                  |
| <b>OVERALL PERFORMANCE IN CURRENT POSITION</b>  |                                  |   |   |  |  |
| Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.  |                                  |   |   |  | RATING LETTER                                  |



SECRET

7 APR 1969

MEMORANDUM FOR: Director of Personnel

SUBJECT: Fitness Report (Annual) -  
[redacted]

1. In compliance with HR 20-20, this memorandum is submitted in lieu of Fitness Report Form 45 covering the performance of [redacted] from January 1968 to 31 March 1969.

2. In late 1967 it was determined that [redacted] would be reassigned in June 1968 from the Office of Planning, Programming and Budgeting (OPPB) to the Missions and Programs Staff (MPS). Under an arrangement with the Director of PPB, [redacted] was lent to MPS on 1 January 1968 for the purpose of preparing himself to assume the functions of Chief of the Programs Group (PRG) in MPS. Accordingly, what follows covers the period of the loan, from 1 January to 11 June 1968, and the period as Chief, PRG, from 12 June 1968 to 31 March 1969.

3. From 1 January to 11 June 1968. During the period of loan to MPS, [redacted] understudied the then Chief of PRG, acquainted himself with all Group files and responsibilities, attended the Advanced Management (Planning) Seminar and performed numerous ad hoc tasks assigned him by C/MPS. He prepared himself for the new assignment and performed the ad hoc tasks assigned with such dispatch, enthusiasm and intelligence as to augur well for the future. No minor task was too menial; every major task was readily accepted as a challenge. In short, his preparation for the new position soon to be assumed left little to be desired on the part of the Rating Officer.

4. From 12 June 1968 to 31 March 1969. As Chief of PRG, [redacted] is responsible for, inter alia, liaison on non-budgetary matters between the CS and OPPB; installing the Planning, Programming and Budgeting System (PPBS) within the CS; advising and assisting CS components in the preparation of Operating Directives and the program

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portions of the annual Operating Program responses; chairing the Program Review Panel; preparing and/or coordinating special studies and surveys on operational programs; and, as required, advising CS components on the requirements of PPBS that need to be addressed in CS documents requiring DCI or Executive Director-Comptroller action.

5. In carrying out the functions enumerated in paragraph 4, above, [redacted] has displayed drive, initiative, enthusiasm and understanding. He has pushed within the CS on those concepts of PPBS that are considered applicable to an intelligence organization and has argued with OPPB against forcing the CS to apply those concepts which are not considered to be applicable. He has worked diligently, alone and with the assistance of the DDP/TRO, to spread throughout the CS an understanding of the why and how of PPBS. He has prepared himself well for and has exercised sound judgment and tact in the handling of the chairmanship of the Program Review Panel, on the actions of which he has brought to bear his experiences in OPPB. He has given unstintingly of his time to lecturing at Agency management courses when requested. Although he understands the need for flexibility in the CS, he has to be slowed down at times so anxious is he to make the CS the best managed directorate in the Agency. His sincere interest in good management has made him and the two senior officers he supervises cost conscious. This affable, conscientious, dedicated, highly experienced, intelligent employee, who already has given evidence of a strong performance, is a pleasure to collaborate with and a valuable asset to MPS and the CS.

[redacted]  
Michael G. Mitchell

Chief, Missions and Programs Staff

I have noted the above report:

[redacted]

7 April 1969  
Date

Reviewing Official

*Conner*

[redacted]

Cord Meyer, Jr.  
Assistant Deputy Director for Plans

8 April 69  
Date

SECRET

CONFIDENTIAL  
(When filled in)

TRAINING REPORT

ADVANCED MANAGEMENT (PLANNING) SEMINAR (50 hours) 3-68

Student :  Dates of Course : 17-22 March 1968  
Year of Birth: 1915 Office : MPS  
Grade : 16 Service Designation D  
ECD Date : September 1952 No. of Students : 36

COURSE OBJECTIVE:

Course objective is to increase individual effectiveness on-the-job by developing better understanding of planning as a managerial skill and by providing familiarization with the Agency's overall planning system.

The course seeks to meet this objective by: a) providing an overall and systematic framework for managerial planning; b) identifying and analyzing basic styles of planning; c) covering selected techniques useful in planning; d) providing an orientation on the PPB system in use in the Agency and Federal Government; and by e) permitting feedback to students on their personal planning styles as revealed during course exercises.

ACHIEVEMENT RECORD

This is a certificate of attendance only. No attempt was made to evaluate student achievement in this course.

FOR THE DIRECTOR OF TRAINING:

Chief Instructor

28 MAR 1968

Date

CONFIDENTIAL  
(When filled in)

SECRET

18 APR 1968

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: [REDACTED] GS-16, O/PPB,  
Employee Serial No. [REDACTED] D Career Service

REFERENCE: HR 20-20c(2)

1. In accordance with reference, this memorandum is submitted in lieu of a Fitness Report (Form 45). This is an annual report but in view of [REDACTED] transfer to the Missions and Programs Staff, DD/P, in January 1968, it covers only the period April 1967 through December 1967.

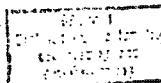
2. [REDACTED] assignment as Program Analyst involved: (a) reviewing and evaluating Agency activities, principally covert action programs; (b) participating in special in-depth studies of selected Agency activities; (c) preparing the Covert Action Program Memorandum for the Director's approval and submission to the Bureau of the Budget; (d) keeping abreast of Agency plans, programs, and progress toward defined objectives; (e) providing general staff assistance to the Director/PPB in implementing the Agency planning, programming, and budgeting system; and (f) preparing special presentations and correspondence for the Office of the Director.

3. During the year, [REDACTED] participated in a survey by the Inspector General of Agency proprietary organizations. He contributed significantly to the study. In addition, he was the Office monitor for at least two studies for the Bureau of the Budget.

4. [REDACTED] was the principal analyst assigned to the review of the Agency's Covert Action Program. He reviewed Directorate program plans and proposals, identified issues to be raised with the Director, and prepared a Program Memorandum for the Director's approval which presented Agency Covert Action plans and programs for the next five years.

7 MAY 1968

SECRET





SECRET

5. [redacted] long operational experience, extensive contacts throughout the Agency, and exceptional writing ability have contributed to the realistic appraisal of programs and plans and to their effective presentation to the Director and to the Bureau of the Budget. [redacted] is effective in dealing with other elements of the Agency and has contributed useful suggestions for improving operations and analysis. In summary, [redacted] made a significant contribution while in the Office. In view of the similarity in functions between the two organizations, I would expect this contribution to be carried forward to his new assignment.

6. I rate [redacted] over-all performance during the period as Strong.

7. [redacted] had no supervisory responsibilities.

8. This report was not shown to [redacted] because of his earlier transfer to another Agency component.

[redacted]  
Chief, Program Analysis Branch  
PPD/O/PPB

Reviewed by:

*I showed this report to [redacted] He pointed out that he is still assigned to COAB. He has not been transferred to MPS/DDP.*

[redacted]  
Chief, Planning and Programming Division, O/PPB

*22 April 1968*  
(date)

SECRET

SECRET

11 APR 1967

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT : [redacted] GS-16, O/PPB,  
Employee Serial No. [redacted] Career Service

REFERENCE: HR 20-20c(2)

1. In accordance with reference, this memorandum is submitted in lieu of a Fitness Report (Form 45). This is an annual report and covers the period 1 August 1966 through 31 March 1967.

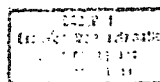
2. [redacted] assignment as Program Analyst involves: (a) reviewing and evaluating Agency activities or programs, principally in the areas of clandestine collection and covert action; (b) participating in special in-depth studies of selected Agency activities; (c) preparing Program Memoranda for the Director's approval and submission to the Bureau of the Budget; (d) keeping abreast of Agency plans, programs, and progress toward defined objectives; (e) providing general staff assistance to the Director/PPB in implementing the Agency PPB system; and (f) preparing special presentations and correspondence for the Office of the Director.

3. [redacted] has many years of experience in clandestine operations and administration, both at Headquarters and in the field. This experience has proven to be of great value to this Office in assessing Agency activities. [redacted] has been quick to see the usefulness of the new planning, programming, and budgeting concept as a tool for assisting management at all levels in the Agency. He has enthusiastically supported the development of a system adapted to Agency needs and has made significant contributions toward this end.

4. Currently, [redacted] is participating in three studies of Agency activities: an Inspector General survey of Agency proprietary organizations and two studies which were requested by the Bureau of the Budget--Agency use of communications media for political-psychological programs and Agency air capabilities at two selected facilities. In addition, [redacted] is in the process of preparing a Program Memorandum for the Director's approval which presents Agency Covert Action plans and programs for the next five years.

21 APR 1967

SECRET



SECRET

5. [redacted] is effective in dealing with other elements of the Agency; he writes exceptionally well, has many useful ideas, and is most cooperative. His vast first-hand knowledge of operational problems permits realistic appraisal of operating plans and proposals. In summary, [redacted] has made a definite contribution during his eight months in this Office; and we expect this contribution to continue in importance.

6. I rate [redacted] over-all performance during the period as Strong.

7. [redacted] has no supervisory responsibilities.

[redacted]  
Chief, Program Analysis Branch  
PPD/O/PPB

Shown to employee:

[redacted] 4/11/67  
(date)

Reviewed by:

[redacted] 11 April 1967  
Chief, Planning and Programming Division, O/PPB (date)

*Concur: [redacted] has provided strong support for the functions of this office and contributes materially to value judgments of covert activities.*

Concur: [redacted] has provided strong support to the functions of this office and contributes materially to value judgments of covert activities.

John M. Clarke  
Director/PPB  
12 April 1967

SECRET

SECRET

MEMORANDUM IN LIEU OF FITNESS REPORT

Name:

Date of Birth:

Sex: Male

Grade: GS-10

SD: D

Official Title: Chief of Base

Assignment: DDP

Current Station:

Appointment: Career

Reporting Period: 1 April 1966-15 August 1966

Report: Reassignment Supervisor  
Reassignment Employee

POSTED ON  
*Handwritten signature*

During the past four months Subject has been in  only a few weeks because of a TDY assignment to Headquarters, and has now been reassigned. There are no grounds for rating his performance.

CERTIFICATION AND COMMENTS

BY EMPLOYEE

Date:

BY SUPERVISOR

Months under my supervision  
19 months

Date: 5 - AUG 1966 COS/US

BY REVIEWING OFFICIAL

Concur.

23 AUG 1966  
*MEH*

Date: 8 August 1966

C/DO  
SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

S-E-C-R-E-T  
(When filled in)

MEMORANDUM FOR: Chief, Transaction: A Records Branch/OP  
FROM: Chief, External Training Branch/RS/TR  
SUBJECT: Completion of External Training

26 SEP 1966

This is to advise you that  training request # R-17992 attended the following external training program:

COURSE: Executive Orientation in Programming, Planning and Budgeting  
INSTITUTION: Civil Service Commission  
DATE: 18-19 August 1966  
GRADE: None

FOR THE DIRECTOR OF TRAINING:

Attachments:

- Grade Report
- Certificate of Satisfactory/Successful Completion
- Certificate of Completion
- Roster of Participants
- Training Report by Institution
- Training Report by Student
- None
- Other: \_\_\_\_\_

GROUP 1  
excluded from automatic  
downgrading and  
declassification

S-E-C-R-E-T  
(When filled in)

SECRET  
(When Filled In)

| REPORT OF TRAINING AT NON-CIA FACILITY<br>(Forward Original and One)   |  |     |   |    |
|--|--|-----|---|----|
| TO : Director of Training<br>ATTN : Registrar/TH<br>THROUGH: Training Officer  | FROM : <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span><br>OFFICE: O/PPB<br>DATE : 24 August 1966 |     |   |    |
| 1. FACILITY ATTENDED<br><br>USCSC  | 2. DATES OF TRAINING<br><br>18 & 19 August 1966  |     |   |    |
| 3. NAME AND DESCRIPTION OF PROGRAM<br><br>Executive Orientation in PP&B  |  |     |   |    |
| 4. YOUR TRAINING OBJECTIVES<br><br>To get a broad introduction to the concepts of PPBS and to learn what some other non-military elements of the Executive Branch are doing with the PPBS.   |  |     |   |    |
| 5. EVALUATION OF PROGRAM (Include a. Strengths and weaknesses of program. b. Identify any outstanding speakers and their specific topics or area of instructional competence.)<br><br>I thought that from a broad, general standpoint the orientation was worthwhile but that far more BOB participation would have enhanced the program greatly. There was too much of "we think this is what BOB means" and too little of BOB saying "this is what we mean". I found the movie presentation of Dr. E. S. Quade's speech terrible because of inept projection, faulty audio equipment, and out-of-place music. Dr. Quade had a message and fortunately the CSC planners must have known their film was inadequate, for we were provided with the written text. Outstanding possibly because he stood out so far in comparison to the others was Mr. Peter Szanton from BOB. Dr. Adams from the University of Maryland was quite good and Mr. Greenhouse of VA was one of the few others who really seemed to know what he was talking about beyond immediate low to medium level parochial application. |  |     |   |    |
| 6. ATTACHED ARE  | TRANSCRIPT OF NOTES  | YES | X | NO |
|  | CERTIFICATE OF COMPLETION  | YES | X | NO |
| 7. I CERTIFY THAT I ATTENDED THE TRAINING PROGRAM DESCRIBED ABOVE.   |  |     |   |    |
| <div style="border: 1px solid black; width: 200px; height: 30px; margin: 0 auto;"></div>   |  |     |   |    |
| NOTE: Upon receipt of this report, with attachments as applicable, a certification of completion will be forwarded to the Office of Personnel for inclusion in your official folder.   |  |     |   |    |

SECRET

*glet*

MEMORANDUM IN LIEU OF FITNESS REPORT

Name:

[Redacted]

Date of Birth:

Sex:

Male

Grade:

GS-16

SD:

D

Official Title:

Chief of Base

Assignment:

DDP [Redacted]

Current Station:

[Redacted]

Appointment:

Career

Reporting Period:

1 April 1965 - 31 March 1966

1. [Redacted]

2. It is against this perspective that Subject's performance during the past year should be evaluated. He approached his job with enthusiasm and vigor but soon found that there were no tangible operational activities he could devote himself or his supporting agents to. He has been frank to state officially and unofficially the absence of any targets to which an operational base could direct itself and has therefore been relatively unoccupied during this period except for an occasional item of local coordination or follow-up on a headquarters task. Subject has had under his direct supervision [Redacted]

11 APR 1965

SECRET

[Administrative stamps and handwritten notes]

*8*

SECRET

[redacted] for the current academic year. He has handled them well and has done his best to maintain their morale in spite of the fact that there were only a few specific targets on whom they could systematically work.

3. Subject is a mature, experienced and energetic officer with both operational and scholarly interests in Far Eastern, [redacted] affairs. His talents are obviously being wasted in [redacted] and arrangements have already been made to have him reassigned. The base itself will be phased down in the summer of 1966 [redacted]

4. Subject has displayed an economical approach to the use both of funds and personnel.

5. In view of the limitations, outside his control, on operational activities [redacted], Subject's performance has been more than satisfactory and is rated as proficient.

CERTIFICATION AND COMMENTS

BY EMPLOYEE

(not available for signature)

Date: [redacted]  
Mos. under my supervision  
15 months

BY SUPERVISOR

Date: 30 MAR 1966

COS/US

BY REVIEWING OFFICIAL

Concur.

Date: 6 APR 1966

C/DO

C. Tracy Barnes

SECRET



SECRET

*Jaw*

MEMORANDUM IN LIEU OF FITNESS REPORT

Name: [Redacted]  
 Date of Birth: [Redacted]  
 Sex: Male  
 Grade: GS-16  
 SD: D  
 Official Title: Ops Officer  
 Assignment: DDP, [Redacted]  
 Current Station: [Redacted]  
 Appointment: Career  
 Reporting Period: 27 October 1964 - 31 March 1965

POSITION ON  
*July-Aug 65*

[Redacted] effectively assumed his duties as Chief of Base, [Redacted] in early January 1965. During the ensuing three months, he has devoted himself primarily to housing, cover, establishment of liaisons, and the orientation of his two outside people. Although he has begun to work on his operational program [Redacted] he has not been at work long enough to provide a basis for any evaluation of his operational performance.

CERTIFICATION AND COMMENTS

BY EMPLOYEE

Not Available for signature

Date:

BY SUPERVISOR

[Redacted Signature Box]

Date: 24 MAR 1965

COS/US

BY REVIEWING OFFICIAL

[Redacted Signature Box]

Date: *25 Mar 65*

C/DO

C. Tracy Barnes

SECRET

021  
 [Stamp]

*ME*

20 MAR 1965

CONFIDENTIAL

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: [REDACTED]

DOB: [REDACTED]  
Male  
GS-15  
Deputy Chief of Station

[REDACTED]  
Annual Report For the Period 1 April 1963 - 31 March 1964

In preparing this memorandum in lieu of submitting Fitness Report Form 45, I can only set forth my yearly reiteration that Subject is a senior, well-experienced, well-motivated, high caliber KUBARK officer who has been in his present grade, GS-15, since 1957. His high standard of contribution to the Station as its Deputy Chief of Station continues unfailingly. [REDACTED] operations encompass a broad spectrum of [REDACTED]

[REDACTED] To keep on top of this activity it needs a man of energy backed up by sound operational knowledge and Subject has carried this job capably and with a will. I would certainly grade him "S" in performance evaluation.

[REDACTED] is widely dispersed and I have urged Subject on several occasions to get out to the various operational elements in an attempt to get closer to and stimulate the working case officers. After one or two starts he has not kept this up on a continuing basis, remaining at his [REDACTED] desk and invariably working through the individual branch chiefs. I am convinced more effort on his part in this field could have resulted in more yield to the Station from his long area and operations experience.

Subject actively participates in the operational review and budget preparation of the Station and has shown a definite cost consciousness.

Subject's [REDACTED] are well-known and the pro's and con's of the value of an officer remaining in one area for the major portion of his time with KUBARK (possibly to the detriment of his career) have been discussed to a sufficient degree as to rule out further reference in this memorandum. Subject is scheduled to leave [REDACTED] and enter an assignment where his operational talents will be of great value.

In any considerations concerning Subject being conducted by any personnel board or by any official of the Agency interested in KUBARK personnel, the significant points are Subject is a deeply motivated, highly capable officer who has been in his current grade too long.

Certification:  
By Employee:

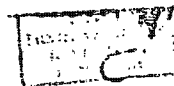
This memorandum was read by Subject and discussed with him in draft. He left the area on TDY and so cannot sign it.

By Supervisor: 23 April 1964

[REDACTED]  
Chief of Station

8 JUN 1964

CONFIDENTIAL



14-00000  
CONFIDENTIAL  
SUBJECT:

[Redacted]

Comments of Reviewing Official:

FE Division is in agreement with this balanced assessment of Subject's performance in [Redacted]. We are also hopeful that he will respond well in a new environment and broaden his operational capabilities.

Signature of Reviewing Official:

[Redacted]  
DCFE

23 MAY 1964

Date

CONFIDENTIAL

S E C R E T

TRAINING REPORT

READING TECHNIQUES (EXECUTIVE WORKSHOP)

| Name                                     | Sex          | Dates of Course  | No. of Students |
|--|--------------|------------------|-----------------|
|  | M            | 24 Jun-19 Jul 57 | 3               |
|  | ROD Date     | Grades or Rank   | Office          |
|  | 28 Sept 1952 | GS-14            | FI/FR           |
| Projected Assignment or Present Position |              |                  |                 |
| Chief, YZ/1                              |              |                  |                 |

I. Objectives:

To inform senior personnel of efficient reading techniques, and to lay the groundwork for improved reading understanding, speed, and retention.

II. Specific Characteristics of Training:

This 20 hour course briefly reviews reading techniques for effective intelligence reading. The course sets forth the main principles of effective reading as Course I-7, Reading Techniques, emphasizing flexibility in reading different subjects for different purposes. Lectures, discussions, and practice exercises are well arranged and very timely. Since these are the only courses often required in executive reading.

III. Evaluation of Results:

[ ] satisfactorily completed Reading Techniques (Executive Workshop) which was conducted each morning from 0700 to 0830.

FOR THE DIRECTOR OF TRAINING:

[ ]

S E C R E T

SECRET

(When filled in)

|  |                 |                      |   |
|--|-----------------|----------------------|---|
| (11-61)  |                 | LANGUAGE DATA RECORD |   |
| PART I-GENERAL   |                 |                      |   |
| 1. NAME (Last-First-Middle)  |                 | 2. DATE OF BIRTH     |   |
|  |                 |                      |   |
| 3. LANGUAGE  | 4. TODAY'S DATE |                      | 5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE |
|  | MONTH           | DAY                  | YEAR  |
|  | April           | 24                   | 1957  |
| PART II-LANGUAGE ELEMENTS  |                 |                      |   |
| SECTION A.   |                 | Reading (40)         |   |
| 1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY, RARELY.   |                 |                      |   |
| 2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.  |                 |                      |   |
| 3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.  |                 |                      |   |
| <input checked="" type="radio"/> 4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.   |                 |                      |   |
| 5. I HAVE NO READING ABILITY IN THE LANGUAGE.  |                 |                      |   |
| SECTION B.   |                 | Writing (41)         |   |
| 1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY, RARELY.                                |                 |                      |   |
| 2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY, RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY. |                 |                      |   |
| 3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING; BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.   |                 |                      |   |
| <input checked="" type="radio"/> 4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.   |                 |                      |   |
| 5. I CANNOT WRITE IN THE LANGUAGE.   |                 |                      |   |
| SECTION C.   |                 | Pronunciation (42)   |   |
| 1. MY PRONUNCIATION IS NATIVE.   |                 |                      |   |
| 2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.  |                 |                      |   |
| <input checked="" type="radio"/> 3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.  |                 |                      |   |
| 4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.   |                 |                      |   |
| 5. I HAVE NO SKILL IN PRONUNCIATION.   |                 |                      |   |
| CONTINUE ON REVERSE SIDE   |                 |                      |   |

| CONTINUATION OF PART II-LANGUAGE ELEMENTS   |  | OFFICE OF PERSONNEL |
|---|--|---------------------|
| Speaking (41)   |  |                     |
| SECTION D.  |  | MAY 7 9 59 AM '57   |
| 1.  | I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS. I CONTROL MY VOICE IN ALL FIELDS WITH WHICH I AM FAMILIAR.   |                     |
| 2.  | I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS. I CONTROL MY VOICE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.       | MAIL ROOM           |
| 3.  | I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.   |                     |
| 4.  | I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.  |                     |
| 5.  | I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.  |                     |
| Understanding (41)  |  |                     |
| SECTION E.  |  |                     |
| 1.  | I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE. I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.                                  |                     |
| 2.  | I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE. I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS. |                     |
| 3.  | I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE. I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.                      |                     |
| 4.  | I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE. I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.  |                     |
| 5.  | I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.   |                     |
| BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.   |  |                     |
| PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)   |  |                     |
| 1.  | I HAVE HAD EXPERIENCE AS A TRANSLATOR.   |                     |
| 2.  | I HAVE HAD EXPERIENCE AS AN INTERPRETER.   |                     |
| 3.  | NONE OF THE ABOVE STATEMENTS APPLY.  |                     |
| 4.  | NONE OF THE ABOVE STATEMENTS APPLY.  |                     |
| PART IV-CERTIFICATION   |  |                     |
| <p>I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-119, MAR. 1949. I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.</p> |  |                     |
| DATE DICTATED   | TITLE  |                     |
| 4/24/57   |  |                     |
| 1443  | C  | E                   |

Transmitted VIA  
[redacted] 10,3/4

SECRET

30 April 1963

MEMORANDUM IN LIEU OF FITNESS REPORT FOR PERIOD:

9 October 1962 - 31 March 1963

[redacted]  
[redacted]

A review of the file reflects that [redacted] has been constantly rated as a well-motivated, superior officer always willing to spend the "extra effort" by a variety of supervisors. During the rating period there has been no diminution in the caliber of professionalism or in the time and effort this man has contributed to the work of the [redacted]. He is a distinct asset. Over and above his drive and professionalism, brings to the Station a full background concerning intelligence activities having been associated with such activities [redacted] for the last seventeen years, either with the military or as a member of the Agency. All of this time he has been [redacted] except for a period of almost three years in Washington.

[redacted] has a proficiency in [redacted] and due to his long tenure [redacted] has contacts at a variety of levels.

In sum, the Agency has in [redacted] a superior officer with long background and continuity [redacted] who can and is making a highly significant contribution to the Agency's objectives in [redacted].

The above has stressed solely [redacted] ability to contribute to KUPARK objectives [redacted]. However, there is no doubt in the rater's mind that [redacted] could perform in a superior manner no matter to what geographical area he was assigned.

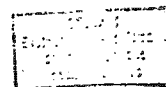
Serial Number [redacted] GS-15, D Designee, EDCS, [redacted]

Read by [redacted]

Date: 1 May 1963 [redacted]

SECRET

20 JUN 1963



000000  
OCT  
1962

*Handwritten mark*

19 OCT 1962

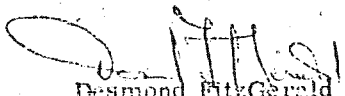
**MEMORANDUM FOR: Director of Personnel**

**SUBJECT: Fitness Report - [redacted]**

1. Chief of Station [redacted] was requested to forward a memorandum, in lieu of Fitness Report Form 45, on [redacted] Deputy Chief of Station, [redacted] to cover the period April 1961 to October 1962. His comments are as stated below:

[redacted] is a superior operations officer of wide scope, experience and imagination. He has over a period of years been highly successful in a variety of supervisory roles both operational and staff. In addition to these attributes he has unique qualifications of an extensive, continuous operational span of time [redacted] [redacted] contacts at a variety of levels and proficiency in the [redacted] language. Because of these latter aspects of his ability, he is able to contribute extensively to [redacted] CIA operational objectives.

2. I concur with the above.

  
Desmond FitzGerald  
Chief, Far East Division

SECRET



**SECRET**  
(When Filled In)

|                       |                        |
|-----------------------|------------------------|
| <b>FITNESS REPORT</b> | EMPLOYEE SERIAL NUMBER |
|-----------------------|------------------------|

|                                       |   |   |  |
|---------------------------------------|---|---|--|
| <b>SECTION A GENERAL</b>              |   |   |  |
| 1. NAME<br>(Last) (First) (Middle)    | 2.  | 3. SEX<br>M   | 4. GRADE<br>GS-15                          |
| 5. SERVICE DESIGNATION<br>D           | 6. OFFICIAL POSITION TITLE<br>Ops Officer D-COS | 7. OFF/DIV/BR OF ASSIGNMENT   |  |
| 8. CAREER STAFF STATUS                |   | 9. TYPE OF REPORT   |  |
| <input type="checkbox"/> NOT ELIGIBLE | <input type="checkbox"/> MEMBER                 | <input type="checkbox"/> DEFERRED                                       | <input type="checkbox"/> INITIAL           |
| <input type="checkbox"/> PENDING      | <input type="checkbox"/> DECLINED               | <input type="checkbox"/> DENIED   | <input checked="" type="checkbox"/> ANNUAL |
| 10. DATE REPORT DUE IN O.P.           |   | 11. REPORTING PERIOD<br>From 1 Apr 60 to 31 Mar 61 To SPECIAL (Specify) |  |

|  |                     |                     |               |               |                 |                 |
|--|---------------------|---------------------|---------------|---------------|-----------------|-----------------|
| <b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>  |                     |                     |               |               |                 |                 |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised). |                     |                     |               |               |                 |                 |
| 1 - Unsatisfactory   | 2 - Barely adequate | 3 - Acceptable      | 4 - Competent | 5 - Excellent | 6 - Superior    | 7 - Outstanding |
| SPECIFIC DUTY NO. 1<br>In the absence of COS, acts as Station Chief  | RATING NO.<br>6     | SPECIFIC DUTY NO. 5 |               |               | RATING NO.<br>6 |                 |
| SPECIFIC DUTY NO. 2<br>As Deputy Chief of Station, supervises Station operational effort and intelligence production X/A 12  | RATING NO.<br>6     | SPECIFIC DUTY NO. 6 |               |               | RATING NO.      |                 |
| SPECIFIC DUTY NO. 3<br>Makes recommendations to COS on Station operational program, cover and personnel  | RATING NO.<br>6     | SPECIFIC DUTY NO. 8 |               |               | RATING NO.      |                 |

|  |                 |
|--|-----------------|
| <b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>   |                 |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. |                 |
| <ul style="list-style-type: none"> <li>1 - Performance in many important respects falls to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>5 - Performance in every respect is outstanding.</li> </ul>   | RATING NO.<br>5 |

|  |                    |                   |                          |                        |              |        |   |   |   |   |
|--|--------------------|-------------------|--------------------------|------------------------|--------------|--------|---|---|---|---|
| <b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>   |                    |                   |                          |                        |              |        |   |   |   |   |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee |                    |                   |                          |                        |              |        |   |   |   |   |
| 1 - Least possible degree  | 2 - Limited degree | 3 - Normal degree | 4 - Above average degree | 5 - Outstanding degree |              |        |   |   |   |   |
| CHARACTERISTICS  |                    |                   |                          | NOT APPLICABLE         | NOT OBSERVED | RATING |   |   |   |   |
|  |                    |                   |                          |                        |              | 1      | 2 | 3 | 4 | 5 |
| GETS THINGS DONE   |                    |                   |                          |                        |              |        |   |   |   | X |
| RESOURCEFUL  |                    |                   |                          |                        |              |        |   |   |   | X |
| ACCEPTS RESPONSIBILITIES   |                    |                   |                          |                        |              |        |   |   |   | X |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES   |                    |                   |                          |                        |              |        |   |   |   | X |
| DOES HIS JOB WITHOUT STRONG SUPPORT  |                    |                   |                          |                        |              |        |   |   | X |   |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE   |                    |                   |                          |                        |              |        |   |   | X |   |
| WRITES EFFECTIVELY   |                    |                   |                          |                        |              |        |   |   | X |   |
| SECURITY CONSCIOUS   |                    |                   |                          |                        |              |        |   |   | X |   |
| THINKS CLEARLY   |                    |                   |                          |                        |              |        |   |   | X |   |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS                                      |                    |                   |                          |                        |              |        | X |   |   |   |
| OTHER (Specify):   |                    |                   |                          |                        |              |        |   |   |   |   |

SEE SECTION "E" ON REVERSE SIDE

SECRET  
(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the basis for determining future personnel actions.

JUN 1 2 52 PM '61  
MAIL ROOM

Subject is a superior officer in every important respect. He is intelligent, imaginative, resourceful and has balanced judgment. He understands administrative procedures and knows how to make them work. As a supervisor, he is firm and fair, and achieves the respect of his subordinates. As a subordinate, he is unfailingly loyal and helpful. He has a good overall grasp of the intelligence business and maintains a healthy attitude of common sense with respect to operations. He is especially useful because of his great knowledge of and long experience in personalities and psychology, yet I consider he would be a superior officer and supervisor in any other context. His personal character is of the best.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE  
I certify that I have seen Sections A, B, C, D and E of this Report.

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR  
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

18 Report was prepared at headquarters.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.  
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS REPORT MADE WITHIN LAST 90 DAYS  
OTHER (Specify):

DATE OFFICIAL TITLE OF SUPERVISOR Y RE  
Chief of Station

3. BY REVIEWING OFFICIAL  
 I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.  
 I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.  
 I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.  
 I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL SIGNATURE  
23 MAY 1961 CFE

SECRET  
(When Filled In)

Recorded  
CGS

81

| FITNESS REPORT   |  |                    |  |   |  | EMPLOYEE SERIAL NUMBER            |  |                        |  |                 |  |  |
|--|--|--------------------|--|---|--|-----------------------------------|--|------------------------|--|-----------------|--|--|
| <b>SECTION A GENERAL</b>   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| 1. NAME  |  |                    |  |   |  | 3. SEX<br>M                       |  | 4. GRADE<br>GS-15      |  |                 |  |  |
| 9. SERVICE DESIGNATION<br>D  |  |                    | 8. OFFICIAL POSITION TITLE<br>Ops Off (DCOS) |   |  | 7. OFF/DIV/BR OF ASSIGNMENT<br>FE |  |                        |  |                 |  |  |
| 10. DATE REPORT DUE IN O.P.  |  |                    |  |   |  | 11. REPORTING PERIOD              |  |                        |  |                 |  |  |
| 31 May 60  |  |                    |  |   |  | From 27 Jun 59 - To 31 Mar 60     |  |                        |  |                 |  |  |
| <b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>  |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| 1 - Unsatisfactory    2 - Barely adequate    3 - Acceptable    4 - Competent    5 - Excellent    6 - Superior    7 - Outstanding   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| SPECIFIC DUTY NO. 1  |  | RATING NO.         |  | SPECIFIC DUTY NO. 4                           |  | RATING NO.                        |  |                        |  |                 |  |  |
| As Deputy for Operations, supervised Station operational effort and intelligence production.   |  | 6                  |  | In the absence of COS, acts as Station Chief. |  | 6                                 |  |                        |  |                 |  |  |
| SPECIFIC DUTY NO. 2  |  | RATING NO.         |  | SPECIFIC DUTY NO. 5                           |  | RATING NO.                        |  |                        |  |                 |  |  |
| Makes recommendations to COS on Station operational program, cover and personnel.  |  | 6                  |  |   |  |                                   |  |                        |  |                 |  |  |
| SPECIFIC DUTY NO. 3  |  | RATING NO.         |  | SPECIFIC DUTY NO. 6                           |  | RATING NO.                        |  |                        |  |                 |  |  |
|  |  | 6                  |  |   |  |                                   |  |                        |  |                 |  |  |
| <b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance. |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| 1 - Performance in many important respects fails to meet requirements.<br>2 - Performance meets most requirements but is deficient in one or more important respects.<br>3 - Performance clearly meets basic requirements.<br>4 - Performance clearly exceeds basic requirements.<br>5 - Performance in every important respect is superior.<br>6 - Performance in every respect is outstanding.   |  |                    |  |   |  |                                   |  |                        |  | RATING NO.<br>5 |  |  |
| <b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| In the rating boxes below, check (X) the degree to which each characteristic applies to the employee   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |
| 1 - Least possible degree  |  | 2 - Limited degree |  | 3 - Normal degree                             |  | 4 - Above average degree          |  | 5 - Outstanding degree |  |                 |  |  |
| CHARACTERISTICS  |  |                    |  |   |  | NOT APPLICABLE                    |  | NOT OBSERVED           |  | RATING          |  |  |
| GETS THINGS DONE   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| RESOURCEFUL  |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| ACCEPTS RESPONSIBILITIES   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| DOES HIS JOB WITHOUT STRONG SUPPORT  |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| WRITES EFFECTIVELY   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| SECURITY CONSCIOUS   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| THINKS CLEARLY   |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS  |  |                    |  |   |  |                                   |  |                        |  | 5               |  |  |
| OTHER (Specify):   |  |                    |  |   |  |                                   |  |                        |  |                 |  |  |

SEE SECTION "E" ON REVERSE SIDE

SECRET

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

This is the first Fitness Report made by Rating Officer on Subject since the latter assumed duties as Deputy for Operations, [redacted] He has worked out extremely well in this role. He is intelligent, energetic, hard-working and faultlessly loyal. He pays attention to detail while remaining mindful of larger considerations. He is effective as a supervisor and commands the willing allegiance of his subordinates. He has excellent judgment in both administrative and operational matters. Because of his extensive background [redacted] his knowledge of things and people [redacted] and his fair-to-good command of the language, he is particularly well suited for his present position. However, he would be an asset to any station or element of Headquarters in a high supervisory position.

This report has been prepared in accordance with FE Division standards which recognize the principle of rating the individual against the group. Thus an 'average' rating reflects an entirely satisfactory performance.

SECTION F CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE 27 Apr 1960 SIGNATURE [redacted]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION. IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON:

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE 27 Apr 1960 OFFICIAL TITLE OF SUPERVISOR [redacted] NO SIGNATURE

3. BY REVIEWING OFFICIAL

I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION:

I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.

I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE

[redacted]

[redacted]

[redacted]

SECRET

SECRET  
(When Filled In)

31 JUL 1959

V-4  
JUL 1959

FITNESS REPORT

EMPLOYEE SERIAL NUMBER  
160947

**SECTION A GENERAL**

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SEX M 4. GRADE GS-15

5. SERVICE DESIGNATION DI IO (FI) (CI) 6. OFF/DIV/BR OF ASSIGNMENT DDP/FE/POS

7. CAREER STAFF STATUS:  NOT ELIGIBLE,  MEMBER,  DEFERRED,  PENDING,  DECLINED,  DENIED

8. TYPE OF REPORT:  ANNUAL,  REASSIGNMENT/SUPERVISOR,  REASSIGNMENT/EMPLOYEE

9. DATE REPORT DUE IN O.P. 30/04/59 10. REPORTING PERIOD From Aug 58 31/03 59 11. SPECIAL (Specify)

**SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES**

List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

| 1 - Unsatisfactory  | 2 - Barely adequate | 3 - Acceptable | 4 - Competent       | 5 - Excellent | 6 - Superior | 7 - Outstanding |
|---|---------------------|----------------|---------------------|---------------|--------------|-----------------|
| SPECIFIC DUTY NO. 1<br>Coordinates and furnishes guidance for all FI and CI matters in the FE Division. |                     | RATING NO. 6   | SPECIFIC DUTY NO. 4 |               | RATING NO.   |                 |
| SPECIFIC DUTY NO. 2<br>Conducts liaison with other components of the DDP, and agencies in general.      |                     | RATING NO. 6   | SPECIFIC DUTY NO. 5 |               | RATING NO.   |                 |
| SPECIFIC DUTY NO. 3<br>Directs and supervises a staff component of nine people.                         |                     | RATING NO. 6   | SPECIFIC DUTY NO. 6 |               | RATING NO.   |                 |

**SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION**

Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance.

|  |              |
|--|--------------|
| <ul style="list-style-type: none"> <li>1 - Performance in many important respects fails to meet requirements.</li> <li>2 - Performance meets most requirements but is deficient in one or more important respects.</li> <li>3 - Performance clearly meets basic requirements.</li> <li>4 - Performance clearly exceeds basic requirements.</li> <li>5 - Performance in every important respect is superior.</li> <li>6 - Performance in every respect is outstanding.</li> </ul> | RATING NO. 5 |
|--|--------------|

**SECTION D DESCRIPTION OF THE EMPLOYEE**

In the rating boxes below, check (X) the degree to which each characteristic applies to the employee

| CHARACTERISTICS   | NOT APPLICABLE | NOT OBSERVED | RATING |   |   |   |   |
|---|----------------|--------------|--------|---|---|---|---|
|   |                |              | 1      | 2 | 3 | 4 | 5 |
| GETS THINGS DONE  |                |              |        |   |   | X |   |
| RESOURCEFUL   |                |              |        |   |   |   | X |
| ACCEPTS RESPONSIBILITIES  |                |              |        |   |   | X |   |
| CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES                  |                |              |        |   |   | X |   |
| DOES HIS JOB WITHOUT STRONG SUPPORT                             |                |              |        |   |   | X |   |
| FACILITATES SMOOTH OPERATION OF HIS OFFICE                      |                |              |        |   |   |   | X |
| WRITES EFFECTIVELY  |                |              |        |   |   | X |   |
| SECURITY CONSCIOUS  |                |              |        |   |   | X |   |
| THINKS CLEARLY  |                |              |        |   |   | X |   |
| DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS |                |              |        |   |   | X |   |
| OTHER (Specify):  |                |              |        |   |   |   |   |

SEE SECTION "E" ON REVERSE SIDE

SECRET  
(When Filled In)

CHIEF OF PERSONNEL

**SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to improve improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and combining greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

MAIL ROOM

Subject is a well-seasoned, imaginative operations officer, who is extremely practical in his approach to operational situations. He is especially fine in his dealings with people whether superiors or subordinates. He did an excellent job as a member of the FE Division Staff in improving and expediting the FI and CI activities of the Division. Subject has an excellent background in [redacted] and is extremely adept at building rapport with his counterparts.

He has the capacity to handle large volumes of work which many times leads him afield into activities that are not within his purview. His personality however allows him to do this without alienating others.

This report has been prepared in accordance with FE Division standards which recognize the principle of rating the individual against the group. Thus an "average" rating reflects an entirely satisfactory performance.

**SECTION F CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE  
I certify that I have seen Sections A, B, C, D and E of this Report.

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR  
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION  
18 months  
IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.  
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS  
REPORT MADE WITHIN LAST 90 DAYS  
OTHER (Specify):

DATE OFFICIAL TITLE OF SUPERVISOR  
22 July 1959 Deputy Chief, FE Division WILLIAM V. BROE

3. BY REVIEWING OFFICIAL  
I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.  
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.  
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.  
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL SIGNATURE  
22 July 1959 Chief, Far East Division Desmond Fitzgerald

SECRET

SECRET

(When Filled In)

### FITNESS REPORT (Part I) PERFORMANCE

#### INSTRUCTIONS

**FOR THE ADMINISTRATIVE OFFICER:** Consult current instructions for completing this report.

**FOR THE SUPERVISOR:** This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-170. It is recommended that you read the entire form before completing any portion. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8, of Section "A" below.

#### SECTION A.

##### GENERAL

|  |                          |  |                        |
|--|--------------------------|--|------------------------|
| 1. NAME  |                          | 2. SER   | 3. SERVICE DESIGNATION |
|  |                          | M  | DI                     |
| 5. OFFICE  |                          | 6. OFFICIAL POSITION TITLE                         |                        |
| DDP/FE/FI/Hqs  |                          | Chief, FE/FI <i>IC (FI)</i>                        |                        |
| 7. GRADE   | 8. DATE REPORT DUE IN OF | 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) |                        |
| GS-15  |                          | December 1957 - August 1958                        |                        |
| 10. TYPE OF REPORT (Check one)   |                          | SPECIAL (Specify)                                  |                        |
| <input type="checkbox"/> INITIAL<br><input checked="" type="checkbox"/> REASSIGNMENT-SUPERVISOR<br><input type="checkbox"/> ANNUAL<br><input type="checkbox"/> REASSIGNMENT-EMPLOYEE |                          |  |                        |

#### SECTION B.

##### CERTIFICATION

1. FOR THE RATED: THIS REPORT  HAS  HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

##### A. CHECK (X) APPROPRIATE STATEMENTS:

|   |   |
|---|---|
| <input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.                      | IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT. |
| <input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.           | I CANNOT CERTIFY THAT THE SAID INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):    |
| <input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THE INDIVIDUAL THE REASONS SO THAT HE UNDERSTANDS THEM. |   |

|                        |                        |                                |
|------------------------|------------------------|--------------------------------|
| 4. THIS REPORT IS BY   | 5. SUPERVISOR          | 6. SUPERVISOR'S OFFICIAL TITLE |
| <i>WILLIAM V. BROE</i> | <i>WILLIAM V. BROE</i> | Deputy Chief, FE Division      |

7. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY *WV* DATE *15 SEP 1958*  
 Posted For Control  
 Reviewed by *WV* DATE *15 SEP 1958*

|  |  |
|--|--|
| I certify that any substantial difference between the rating and the rating as reflected in the above section. | <input type="checkbox"/> SHOWN ON ATTACHED SHEET |
| 8. DATE  | 9. OFFICIAL TITLE OF REVIEWING OFFICIAL          |
|  | Chief, FE Division                               |

#### SECTION C. JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- 1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
- 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
- 5 - A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

5

INSERT RATING NUMBER

COMMENTS:

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

DIRECTIONS:

- a. State in the spaces below up to six of the more important SPECIFIC duties performed. Place the most important first. Do not include minor or unimportant duties.
- b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty.
- c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- d. Compare in your mind, when possible, the individual being rated with others performing similar duty at a similar level of responsibility.
- e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- f. Be specific. Examples of the kind of duties that might be rated are:
- |                             |                                |                                |
|-----------------------------|--------------------------------|--------------------------------|
| ORAL BRIEFING               | HAS AND USES AREA KNOWLEDGE    | CONDUCTS INTERVIEWS            |
| GIVING LECTURES             | DEVELOPS NEW PROGRAMS          | PREPARES SUMMARIES             |
| CONDUCTING SEMINARS         | ANALYZES INDUSTRIAL REPORTS    | TRANSLATES GERMAN              |
| WRITING TECHNICAL REPORTS   | MANAGES FILES                  | DEBRIEFING SOURCES             |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO                 | KEEPS BOOKS                    |
| Typing                      | COORDINATES WITH OTHER OFFICES | DRIVES TRUCK                   |
| TAKING DICTATION            | WRITES REGULATIONS             | MAINTAINS AIR CONDITIONING     |
| SUPERVISING                 | PREPARES CORRESPONDENCE        | EVALUATES SIGNIFICANCE OF DATA |
- g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

SEP 15 11 52 AM '58  
MAIL ROOM

- |   |  |
|---|--|
| 1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY                                     | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS |
| 2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY                                 | 7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY   |
| 3 - PERFORMS THIS DUTY ACCEPTABLY   |  |
| 4 - PERFORMS THIS DUTY IN A COMPETENT MANNER  |  |
| 5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB |  |

|   |                    |                     |               |
|---|--------------------|---------------------|---------------|
| SPECIFIC DUTY NO. 1<br>Coordinates and furnishes guidance for all FI and CI matters in the FE Div 6 | RATING NUMBER<br>6 | SPECIFIC DUTY NO. 4 | RATING NUMBER |
| SPECIFIC DUTY NO. 2<br>Conducts liaison with other components of DDP and the Agency in general      | RATING NUMBER<br>6 | SPECIFIC DUTY NO. 5 | RATING NUMBER |
| SPECIFIC DUTY NO. 3   | RATING NUMBER      | SPECIFIC DUTY NO. 6 | RATING NUMBER |

3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

DIRECTIONS: Stress strengths and weaknesses, particularly those which affect development on present job.

[redacted] is a sound, well experienced imaginative officer. He is especially adept in dealing with people at all levels so as to earn their respect and cooperation.

SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION

DIRECTIONS: Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents...and how he fits in with your team. Compare him with others doing similar work of about the same level.

- |   |  |
|---|--|
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div><br>RATING NUMBER | 1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED   |
|   | 2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW                                   |
|   | 3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION |
|   | 4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION  |
|   | 5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS   |
|   | 6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION  |
|   | 7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION   |

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?  YES  NO. IF YES, EXPLAIN FULLY:



SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OP no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last, First, Middle) 2. DATE OF BIRTH 3. SEX M 4. SERVICE DESIGNATION DI
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/FE/FI/Hqs 6. OFFICIAL POSITION TITLE Chief, FE/FI TC (IT)
7. GRADE GS-15 8. DATE REPORT DUE IN OF Dec 1957 - Aug 1958
10. TYPE OF REPORT (Check one) INITIAL X REASSIGNMENT-SUPERVISOR SPECIAL (Specify)

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY EST JUDGEMENT OF THE INDIVIDUAL BEING RATED
A. THIS DATE 2 Sept 1958 B. NAME William V. Broe C. SUPERVISOR'S OFFICIAL TITLE Deputy Chief, FE Division
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.
A. THIS DATE 2 Sept 1958 B. TYPED OR P OFFICIAL Alfred C. Ulmer, Jr. C. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, FE Division

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

4
1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES.

2. SUPERVISORY POTENTIAL
DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, rate the rating in the "potential" column.

Table with columns: DESCRIPTIVE RATING NUMBER, ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Rows describe various supervisory situations like 'A GROUP DOING THE BASIC JOB' and 'A GROUP WHO MAY OR MAY NOT BE SUPERVISORS'.

**SECRET**  
(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION  
**6 months**

4. COMMENTS CONCERNING POTENTIAL

SEP-15 11 52 AM '68  
MAIL ROOM

has displayed the operational and supervisory attributes that give every indication that he has an excellent potential to advance with this Agency.

**SECTION II. FUTURE PLANS**

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

None

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

Subject is married and has six children ranging in age from 4 to 15 years.

**SECTION I. DESCRIPTION OF INDIVIDUAL**

**DIRECTIONS:** This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

| CATEGORY | STATEMENT  | CATEGORY | STATEMENT  | CATEGORY | STATEMENT  |
|----------|--|----------|--|----------|--|
| 5        | 1. ABLE TO SEE ANOTHER'S POINT OF VIEW               | 4        | 11. HAS HIGH STANDARDS OF ACCOMPLISHMENT               | 5        | 21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES        |
| 4        | 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEEDED ARISING | 4        | 12. SHOWS ORIGINALITY                                  | 4        | 22. FULFILLS DECISIONS REGARDLESS OF OWN FEELINGS      |
| 5        | 3. HAS INITIATIVE                                    | 4        | 13. ACCEPTS RESPONSIBILITY                             | 4        | 23. IS THOUGHTFUL OF OTHERS                            |
| 4        | 4. IS ANALYTIC IN HIS THINKING                       | 5        | 14. ADMITS HIS ERRORS                                  | 4        | 24. BOWS WELL UNDER PRESSURE                           |
| 5        | 5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS    | 5        | 15. RESPONDS WELL TO SUPERVISION                       | 4        | 25. DISPLAYS JUDGEMENT                                 |
| 5        | 6. KNOWS WHEN TO SEEK ASSISTANCE                     | 5        | 16. DOES HIS JOB WITHOUT STRONG SUPPORT                | 4        | 26. IS SECURITY CONSCIOUS                              |
| 5        | 7. CAN GET ALONG WITH PEOPLE                         | 4        | 17. COMES UP WITH SOLUTIONS TO PROBLEMS                | 5        | 27. IS VERSATILE                                       |
| 5        | 8. HAS MEMORY FOR FACTS                              | 4        | 18. IS OBSERVANT                                       | 4        | 28. HIS CRITICISM IS CONSTRUCTIVE                      |
| 4        | 9. GETS THINGS DONE                                  | 4        | 19. THINKS CLEARLY                                     | 4        | 29. FACILITATES SMOOTH OPERATION OF HIS OFFICE         |
| 4        | 10. CAN cope WITH EMERGENCIES                        | 4        | 20. COMPLETES ASSIGNMENTS WITHIN ALLOCABLE TIME LIMITS | 4        | 30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION |

**SECRET**

SECRET

(When Filled In)

### FITNESS REPORT (Part I) PERFORMANCE

#### INSTRUCTIONS

**FOR THE ADMINISTRATIVE OFFICER:** Consult current instructions for completing this report.

**FOR THE SUPERVISOR:** This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item 8. of Section "A" below.

| SECTION A. GENERAL  |  |  |   |
|---|--|--|---|
| 1. NAME<br>(Last) (First) (Middle)                          | 2. DATE OF BIRTH                               | 3. SEX<br>M  | 4. SERVICE DESIGNATION<br>DI                  |
| 5. OFFICE/DIVISION BRANCH OF ASSIGNMENT<br>DDP/FE/PI Hdqrs. |  | 6. OFFICIAL POSITION TITLE<br>Chief, FE/PI                                       |   |
| 7. GRADE<br>GS-15   | 8. DATE REPORT DUE IN OP<br>20 January 1958    | 9. PERIOD COVERED BY THIS REPORT (Inclusive dates)<br>March 1957 - December 1957 |   |
| 10. TYPE OF REPORT (Check one)                              | INITIAL<br><input checked="" type="checkbox"/> | REASSIGNMENT-SUPERVISOR<br><input type="checkbox"/>                              | SPECIAL (Specify)<br><input type="checkbox"/> |
|   | ANNUAL<br><input checked="" type="checkbox"/>  | REASSIGNMENT-EMPLOYEE<br><input type="checkbox"/>                                |   |

| SECTION B. CERTIFICATION   |  |
|--|--|
| 1. FOR THE RATER: THIS REPORT <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:            |  |
| A. CHECK (X) APPROPRIATE STATEMENTS:   |  |
| <input checked="" type="checkbox"/> THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.   | IF INDIVIDUAL IS RATED "I" IN CI OR D, A WARNING LETTER HAS GONE TO CIVILIAN COPY ATTACHED TO THIS REPORT. |
| <input type="checkbox"/> THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.  |  |
| <input checked="" type="checkbox"/> I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.   | I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):     |
| 10. THIS DATE<br>10 Jan. 58  | C. TYPED OR PRINTED NAME AND SIGNATURE OF SUPERVISOR<br>Vernon L. Gresham                                  |
|  | D. SUPERVISOR'S OFFICIAL TITLE<br>Deputy Chief, Far East Div.  |
| 7. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT. |  |

BY DATE  
 Posted For Control *[Signature]* 2/3/58  
 Reviewed by *[Signature]* 2/10/58

|   |   |
|---|---|
| I certify that any substantial difference reflected in the above section. |   |
| A. THIS DATE<br>10 Jan. 58  | B. TYPED OR PRINTED NAME OF OFFICIAL<br>Alfred C. Illmer, Jr.       |
|   | C. OFFICIAL TITLE OF REVIEWING OFFICIAL<br>Chief, Far East Division |

| SECTION C. JOB PERFORMANCE EVALUATION  |  |
|--|--|
| 1. RATING ON GENERAL PERFORMANCE OF DUTIES   |  |
| DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D. |  |
| 5<br>INSERT RATING NUMBER  | 1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.   |
|  | 2 - FAIRLY ADEQUATE IN PERFORMANCE, ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. |
|  | 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.  |
|  | 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.  |
|  | 5 - EXCELLENT PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.  |
|  | 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.              |
| COMMENTS:  |  |

**SECRET**

(When Filled In)

OFFICE OF PERSONNEL

**7. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES**

**DIRECTIONS:**

- State in the spaces below up to six of the most important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.
- Note performance on each specific duty considering ONLY effectiveness in performance of that specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. **MAKING ROOM** Note them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:
 

|                             |                                 |                                |
|-----------------------------|---------------------------------|--------------------------------|
| ORAL BRIEFING               | HAS AND USES AREA KNOWLEDGE     | CONDUCTS INTERROGATIONS        |
| GIVING LECTURES             | DEVELOPS NEW PROGRAMS           | PREPARES SUMMARIES             |
| CONDUCTING SEMINARS         | ANALYZES INDUSTRIAL REPORTS     | TRANSLATES GERMAN              |
| WRITING TECHNICAL REPORTS   | MANAGES FILES                   | DEBRIEFING SOURCES             |
| CONDUCTING EXTERNAL LIAISON | OPERATES RADIO                  | KEEPS BOOKS                    |
| TYPING                      | COORDINATES WITH OTHER OFFICERS | DRIVES TRUCK                   |
| TAKING DICTATION            | WRITES REGULATIONS              | MAINTAINS AIR CONDITIONING     |
| SUPERVISING                 | PREPARES CORRESPONDENCE         | EVALUATES SIGNIFICANCE OF DATA |

g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

- |   |   |
|---|---|
| <p><b>DESCRIPTIVE RATING NUMBER</b></p> <p>1 - INCOMPETENT IN THE PERFORMANCE OF THIS DUTY</p> <p>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY</p> <p>3 - PERFORMS THIS DUTY ACCEPTABLY</p> <p>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER</p> <p>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB</p> | <p>6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS</p> <p>7 - EXCELS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY</p> |
|---|---|

|  |                           |  |  |
|--|---------------------------|--|--|
| SPECIFIC DUTY NO. 1<br><b>Acting Chief of Branch</b>         | RATING NUMBER<br><b>6</b> | SPECIFIC DUTY NO. 4<br><input style="width: 100%;" type="text"/> | RATING NUMBER<br><b>6</b>                                  |
| SPECIFIC DUTY NO. 2<br><b>Has and Uses Area Knowledge</b>    | RATING NUMBER<br><b>6</b> | SPECIFIC DUTY NO. 5<br><input style="width: 100%;" type="text"/> | RATING NUMBER<br><input style="width: 100%;" type="text"/> |
| SPECIFIC DUTY NO. 3<br><b>Coordinates with other offices</b> | RATING NUMBER<br><b>6</b> | SPECIFIC DUTY NO. 6<br><input style="width: 100%;" type="text"/> | RATING NUMBER<br><input style="width: 100%;" type="text"/> |

**8. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

**DIRECTIONS:** Stress strengths and weaknesses, particularly those which affect development on present job.

During most of the period for which subject is rated he was acting chief of an active and important branch . He is currently chief of the FT group of the Division's plans and operations staff. Subject is a hard-working, dedicated employee. He has initiative and imagination and is profiting enormously from his present hq. experience. He is a very fine employee.

**SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION**

**DIRECTIONS:** Take into account here everything you know about the individual... productivity, conduct on the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.

|   |  |
|---|--|
| <p><b>RATING NUMBER</b></p> <p><b>6</b></p> | <p>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</p> <p>2 - OF DOUBTFUL SUITABILITY - SHOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</p> <p>3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</p> <p>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</p> <p>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING TENDENCIES</p> <p>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</p> <p>7 - EXCELS OF ONLY A FEW IN SUITABILITY FOR POSITION IN THE ORGANIZATION</p> |
|---|--|

IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?  YES  NO (IF YES EXPLAIN FULLY)

After many years in the field with virtually no hq. duty, subject is now obtaining both command and staff experience. He has adapted himself splendidly and has shown remarkable versatility.

SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, self and complete after 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the OI no later than 30 days after the due date indicated in item 8 of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SER M 4. SERVICE DESIGNATION DI
5. OFFICE DIVISION BRANCH OF ASSIGNMENT DDP/FE/FI Hdqs. 6. OFFICIAL POSITION TITLE Chief, FE/FI
7. GRADE GS-15 8. DATE REPORT DUE IN OF 20 January 1958 9. PERIOD COVERED BY THIS REPORT (Inclusive Dates) March 1957 - December 1957
10. TYPE OF REPORT (Circle one) INITIAL REASSIGNMENT-SUPERVISOR SPECIAL (Specify)
XX ANNUAL REASSIGNMENT-EMPLOYEE

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED
2. THIS DATE 10 Jan. 1958 3. SUPERVISOR'S OFFICIAL TITLE Deputy Chief, Far East Div.
4. OFFICE OF REVIEWING OFFICIAL 5. OFFICE OF OPINION IN ATTACHED MEMO.
6. THIS DATE 10 Jan. 1958 7. RATED OR PRIOR OFFICIAL Alfred C. Ulmer, Jr. 8. OFFICIAL TITLE OF REVIEWING OFFICIAL Chief, Far East Division

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES
DIRECTOR'S: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.
1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES
4

2. SUPERVISORY POTENTIAL
DIRECTOR'S: Answer this question: Has this person the ability to be a supervisor? ( ) Yes ( ) No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.
1 - HAVE AN OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
2 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
3 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
4 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION

Table with columns: Actual, Potential, Descriptive Situation. Rows 1-4 describing supervisory levels from direct supervision to independent responsibility.

**SECRET**

(When Filled In)

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION **OFFICE OF PERSONNEL**  
 14 months

4. COMMENTS CONCERNING POTENTIAL  
 After many years [redacted] without any hq. duty, subject is now <sup>needed by</sup> ~~needed~~ hq. experience. He has shown great adaptability and versatility in two <sup>of his</sup> ~~two~~ responsible hqs. positions. **MAIL ROOM**

**SECTION II. FUTURE PLANS**

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL  
 Subject should remain at hq. at least another year in order that he may further broaden his experience.

**2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS**

Subject is married and has six children ranging in age from 3 to 14 years.

**SECTION I. DESCRIPTION OF INDIVIDUAL**

**DIRECTIONS:** This section is provided as an aid in describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

- 1 - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL
- 2 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE
- 3 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
- 4 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
- 5 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
- 6 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

| CATEGORY | STATEMENT   | CATEGORY | STATEMENT  | CATEGORY | STATEMENT  |
|----------|---|----------|--|----------|--|
| 5        | 1. ABLE TO SEE AND MAKE POINT OF VIEW             | 4        | 11. HAS HIGH STANDARD OF ACCOMPLISHMENT                | 4        | 21. IS EFFECTIVE IN DISCUSSING WITH ASSOCIATES         |
| 4        | 2. CAN MAKE DECISIONS OR USE COMMON SENSE         | 4        | 12. SHOWS INITIATIVE                                   | 4        | 22. IMPLEMENTS DECISIONS REGARDLESS OF HOW FEELINGS    |
| 5        | 3. HAS INITIATIVE                                 | 4        | 13. ACCEPTS RESPONSIBILITY                             | 4        | 23. IS THOUGHTFUL OF OTHERS                            |
| 4        | 4. IS ANALYTIC IN HIS THINKING                    | 5        | 14. ACCEPTS HIS CRITICISMS                             | 4        | 24. DOES NOT BELL UNDER PRESSURE                       |
| 5        | 5. STRINGS CONSTANTLY FOR HIS KNOWLEDGE AND IDEAS | 5        | 15. RESPONDS WELL TO SUPERVISION                       | 4        | 25. DISPLAYS JUDGEMENT                                 |
| 5        | 6. KNOWS WHEN TO SEEK ASSISTANCE                  | 5        | 16. DOES HIS JOB WITHOUT EXCESSIVE SUPPORT             | 4        | 26. IS SECURITY CONSCIOUS                              |
| 5        | 7. CAN GET ALONG WITH PEOPLE                      | 4        | 17. CAPABLE OF NEW SOLUTIONS TO PROBLEMS               | 5        | 27. IS VERSATILE                                       |
| 4        | 8. HAS ENERGY FOR HIS WORK                        | 4        | 18. IS DETAILED  | 4        | 28. HIS CRITICISM IS CONSTRUCTIVE                      |
| 5        | 9. DOES THINGS WELL                               | 4        | 19. THINKS CLEARLY                                     | 4        | 29. FACILITATES SMOOTH OPERATION OF HIS OFFICE         |
| 4        | 10. CAN WORK WITH SUPERVISORS                     | 4        | 20. COMPLETES ASSIGNMENTS WITHIN ESTIMABLE TIME LIMITS | 4        | 30. DOES NOT REQUIRE STRONG AND CONTINUOUS SUPERVISION |

SECRET

# FITNESS REPORT (Part I) PERFORMANCE

## INSTRUCTIONS:

**FOR THE ADMINISTRATIVE OFFICER:** Consult current instructions for completing this report.

**FOR THE SUPERVISOR:** This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any portion. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item A, of Section A below.

**SECTION A. GENERAL**

1. NAME (First) (Middle) 2. DATE OF BIRTH 3. SEX M 4. SERVICE DESIGNATION DI

5. OFFICE, DIVISION, BRANCH OF ASSIGNMENT DDP/FE/1 6. OFFICIAL POSITION TITLE Deputy Chief, FE/1

7. GRADE GS-14 8. DATE REPORT DUE IN OP April 30, 1957 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 16 November 1956 - 15 March 1957

10. TYPE OF REPORT (Check one)  
 INITIAL  REASSIGNMENT - SUPERVISOR  SPECIAL (Specify)  
 ANNUAL  REASSIGNMENT - EMPLOYEE

**SECTION B. CERTIFICATION**

1. FOR THE MATERIAL IN THIS REPORT  HAS  HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.  
 THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.  
 I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.

IF INDIVIDUAL IS RATED "C" OR "D," A BARING LETTER 305 SENT TO HIM & JOB ATTACHED TO THIS REPORT.  
 I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):

B. THIS DATE 16 April 1957 C. SIGNED OR PRINTED NAME OF SUPERVISOR [Redacted] D. SUPERVISOR'S OFFICIAL TITLE Chief, FE/1

7. FOR THE REVIEWING OFFICER: I AGREE WITH THE SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY DATE  
 Posted For Control [Signature] 16 APR 1957  
 Reviewed by FUD [Signature]

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE 16 April 1957 B. SIGNED OR PRINTED NAME OF OFFICIAL [Redacted] C. OFFICIAL TITLE OF REVIEWING OFFICIAL Deputy Chief, FE

**SECTION C. RATING ON GENERAL PERFORMANCE OF DUTIES**

**DEFICIENCIES:** Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

1 - DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.  
 2 - BARELY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.  
 3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.  
 4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.  
 5 - A HIGH PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.  
 6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

Rating: 4/5

**COMMENTS:** With additional experience on the job, his performance might be such as to warrant a 5 rating.

SECRET

STATE OF PERSONNEL

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES

APR 18 2 47 PM '57

**DIRECTIONS:**

- State in the spaces below up to six of the more important SPECIFIC duties performed during the rating period. Place the most important first. Do not include minor or unimportant duties.
- Note performance on each specific duty considering only effectiveness in performance of this specific duty.
- For supervisors, ability to supervise will always be rated as a specific duty (do not rate supervisors those who supervise a secretary only).
- Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.
- Two individuals with the same job title may be performing different duties. If so, rate them on different duties.
- Be specific. Examples of the kind of duties that might be rated are:
 

|  |  |   |
|--|--|---|
| <ul style="list-style-type: none"> <li>ORAL BRIEFING</li> <li>GIVING LECTURES</li> <li>CONDUCTING SEMINARS</li> <li>WRITING TECHNICAL REPORTS</li> <li>CONDUCTING EXTERNAL LIAISON</li> <li>TYPING</li> <li>TAKING DICTATION</li> <li>SUPERVISING</li> </ul> | <ul style="list-style-type: none"> <li>HAS AND USES AREA KNOWLEDGE</li> <li>DEVELOPS NEW PROGRAMS</li> <li>ANALYZES INDIVIDUAL REPORTS</li> <li>MANAGES FILES</li> <li>OPERATES RADIO</li> <li>COORDINATES WITH OTHER OFFICERS</li> <li>WRITES REGULATIONS</li> <li>PREPARES CORRESPONDENCE</li> </ul> | <ul style="list-style-type: none"> <li>CONDUCTS INTERROGATIONS</li> <li>PREPARES SUMMARIES</li> <li>TRANSLATES GERMAN</li> <li>DEVELOPS SOURCES</li> <li>KEEPS INDEX</li> <li>DRIVES TRUCK</li> <li>MAINTAINS AIR CONDITIONING</li> <li>EVALUATES SIGNIFICANCE OF DATA</li> </ul> |
|--|--|---|

8. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.

|                                  |   |   |
|----------------------------------|---|---|
| <b>DESCRIPTIVE RATING NUMBER</b> | 1 - INCOMPLETE IN THE PERFORMANCE OF THIS DUTY<br>2 - BARELY ADEQUATE IN THE PERFORMANCE OF THIS DUTY<br>3 - PERFORMS THIS DUTY ACCEPTABLY<br>4 - PERFORMS THIS DUTY IN A COMPETENT MANNER<br>5 - PERFORMS THIS DUTY IN SUCH A FINE MANNER THAT HE IS A DISTINCT ASSET ON HIS JOB | 6 - PERFORMS THIS DUTY IN AN OUTSTANDING MANNER FOUND IN VERY FEW INDIVIDUALS HOLDING SIMILAR JOBS<br>7 - EXCELLS ANYONE I KNOW IN THE PERFORMANCE OF THIS DUTY |
|----------------------------------|---|---|

|  |                      |   |                    |
|--|----------------------|---|--------------------|
| SPECIFIC DUTY NO. 1<br>Assists Branch Chief in Management and supervision of Branch      | RATING NUMBER<br>4/5 | SPECIFIC DUTY NO. 4<br>Provides operational and administrative guidance to field station. | RATING NUMBER<br>5 |
| SPECIFIC DUTY NO. 2<br>Gen. Supervision of CE, Liaison and CP ops. of Branch             | RATING NUMBER<br>5   | SPECIFIC DUTY NO. 5   | RATING NUMBER      |
| SPECIFIC DUTY NO. 3<br>Conducts Liaison with other Agency elements and outside agencies. | RATING NUMBER<br>6   | SPECIFIC DUTY NO. 6   | RATING NUMBER      |

**3. NARRATIVE DESCRIPTION OF QUALITY OF JOB PERFORMANCE**

**DIRECTIONS:** Stress strengths and weaknesses, particularly those which affect development on present job.

His greatest strength is a warm and engaging personality, an unabashed friendliness that secures him an immediate willingness to cooperate from the people with whom he deals. He is an extremely hard worker, an accurate and meticulous reporter, has energy and enthusiasm and is generally sound in his judgment. On occasions he demonstrates a lack of depth in his assessment of a situation which leads him to jump too quickly to conclusions based on intuition and emotion. As the facts assert themselves, however, he is ready to revise his opinions. As his knowledge of the Agency and operations continue to grow, however, this tendency should diminish.

**SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION**

**DIRECTIONS:** Take into account here everything you know about the individual... productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents... and how he fits in with your team. Compare him with others doing similar work of about the same level.

- |                      |  |
|----------------------|--|
| 4/5<br>RATING NUMBER | <ol style="list-style-type: none"> <li>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</li> <li>2 - OF DOUBTFUL SUITABILITY - SHOULD NOT HAVE ACQUIRED HIM IF I HAD KNOWN WHAT I KNOW NOW</li> <li>3 - A BARELY ACCEPTABLE EMPLOYEE... BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</li> <li>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</li> <li>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</li> <li>6 - AN UNUSUALLY FINE PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</li> <li>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</li> </ol> |
|----------------------|--|

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION?  YES  NO. IF YES, EXPLAIN FULLY:

Although he is perfectly capable of conducting his current job with distinction, he would shine in any position involving liaison with the U.S. military in which his long experience in dealing with military men and his personality could be brought to bear.

SECRET



SECRET

(When Filled In)

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the (G) no later than 30 days after the due date indicated in item B of Section "E" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle) 2. DATE OF BIRTH 3. SER M 4. SERVICE DESIGNATION D1
5. OFFICE/DIVISION/BRANCH OF ASSIGNMENT DDP/FE/1 6. OFFICIAL POSITION TITLE Deputy Chief, FE/1
7. GRADE GS-14 8. DATE REPORT DUE IN OF April 30, 1957 9. PERIOD COVERED BY THIS REPORT (Inclusive dates) 16 Nov. 1956 - 15 March 1957
10. TYPE OF REPORT (Check one) INITIAL X REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE SPECIAL (Specify)

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGMENT OF THE INDIVIDUAL BEING RATED.
A. THIS DATE 16 April 1957 B. TYPED OR PRINTED NAME AND OFFICIAL TITLE Chief, FE/1
2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.
A. THIS DATE 16 April 1957 B. TYPED OR PRINTED NAME AND OFFICIAL TITLE Deputy Chief, FE

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES. DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to resume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

5
1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
3 - MAKING PROGRESS, BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
5 - WILL PROBABLY ADJUST QUICKLY TO MORE RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE PER WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

Table with columns: ACTUAL, POTENTIAL, DESCRIPTIVE SITUATION. Includes ratings 2, 0, 2 and descriptive situations like 'A GROUP DOING THE BASIC JOB (First line supervisors)' and 'WHEN IMMEDIATE SUPERVISOR'S ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION'.

SECRET

(When Filled In)

OFFICE OF PERSONNEL

1. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATEE EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION  
2 months

2. COMMENTS CONCERNING POTENTIAL  
When he is unsure of himself in new problems, he tends to trade on his <sup>APR 18 2 42 PM '57</sup> and his emotional feeling for a situation or a person resulting in a vacillation of attitude and an inconsistency that limits his effectiveness. <sup>WHERMAN ROOM</sup> had past experience he generally makes sound decisions.

SECTION II. FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS  
He has a large family (six children) and would like to return to the field after enough Headquarters experience.

SECTION I. DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

4 - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL  
1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE  
2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE  
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE  
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE  
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

| CATEGORY | STATEMENT   | CATEGORY | STATEMENT  | CATEGORY | STATEMENT  |
|----------|---|----------|--|----------|--|
| 4        | 1. ABLE TO SEE ANOTHER'S POINT OF VIEW            | 4        | 11. HAS HIGH STANDARDS OF ACCOMPLISHMENT               | 5        | 21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES          |
| 3        | 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES | 3        | 12. SHOWS ORIGINALITY                                  | 4        | 22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS      |
| 4/5      | 3. HAS INITIATIVE                                 | 4        | 13. ACCEPTS RESPONSIBILITIES                           | 5        | 23. IS INFLUENTIAL ON OTHERS                             |
| 3        | 4. IS ANALYTIC IN HIS THINKING                    | 5        | 14. ADMITS HIS ERRORS                                  | 3        | 24. REMAINS WELLS UNDER PRESSURE                         |
| 4        | 5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS | 4        | 15. RESPONDS WELL TO SUPERVISION                       | 3/4      | 25. DISPLAYS JUDGEMENT                                   |
| 5        | 6. ASKS WHEN TO BEER ASSISTANCE                   | 3        | 16. DOES HIS JOB WITHOUT STRONG SUPPORT                | 4        | 26. IS SECURITY CONSCIOUS                                |
| 5        | 7. CAN GET ALONG WITH PEOPLE                      | 3/4      | 17. COMES UP WITH SOLUTIONS TO PROBLEMS                | 4        | 27. IS VERSATILE   |
| 4        | 8. HAS EVIDENCE FOR FACTS                         | 4        | 18. IS HESITANT  | 4        | 28. HIS CRITICISM IS CONSTRUCTIVE                        |
| 4        | 9. GETS THINGS DONE                               | 4        | 19. THINKS CLEARLY                                     | 4        | 29. FACILITATES SMOOTH OPERATION OF HIS OFFICE           |
| 3        | 10. CAN COME WITH EMERGENCIES                     | 4/5      | 20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME LIMITS | 3        | 30. DOES NOT REQUIRE STANDING AND CONTINUOUS SUPERVISION |

SECRET

C-O-N-F-I-D-E-N-T-I-A-L  
(When Filled In)

18 January 1957

MEMORANDUM FOR RECORD

THROUGH: Staff Training Officer

SUBJECT: Completion of Operational Management Course for FE Personnel

1.  FE/VI, has completed a Special Management Course (Operational Management Seminar) held 7-18 January, 1957.

2. The course covered 38 hours of lectures and group discussions, together with a limited amount of reading. The course outlined the responsibilities of management at the Branch Chief level and selected problems of Headquarters management dealing with clandestine activities. The individual named completed all course assignments but received no grade, since no evaluation was made of the student's performance in this special course, or of his ability to perform a particular job assignment.

FOR THE DIRECTOR OF TRAINING:

Chief Instructor, Basic Management

C-O-N-F-I-D-E-N-T-I-A-L  
(When Filled In)

SECRET

18 December 1956

MEMORANDUM FOR THE RECORD

SUBJECT: Fitness Report on [redacted]

1. The attached Fitness Report should be read with the following facts in mind. The Rating Officer arrived in [redacted] on 21 January 1956. [redacted] on or about 19 March 1956 and was in the United States on TDY until 8 May 1956. From 8 May until he

[redacted]

2. I question, therefore, whether [redacted] was under the Rating Officer's direct supervision for a sufficient period of time to insure that the attached report is a completely equitable one. Inasmuch as the Chief of Station reviewed this report and made no comment, I am in no position to take issue with it, but suggest that it be viewed in the context of other Fitness Reports on [redacted]

[redacted]

Chief, FE/1

Attachment

SECRET  
(When Filled In)

### FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:

1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

#### INSTRUCTIONS

**TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER:** Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

**TO THE FIELD SUPERVISOR:** Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

#### SECTION I

|                            |  |                  |        |                        |
|----------------------------|--|------------------|--------|------------------------|
| LEAVE                      | USE ONLY   | 1. DATE OF BIRTH | 2. SEX | 3. SERVICE DESIGNATION |
|                            |  |                  | M      | <del>DD</del> D1       |
| 4. GRADE                   | 5. STATION DESIGNATION (Current)                   |                  |        |                        |
| GS-14                      |  |                  |        |                        |
| 6. DUE DATE OF THIS REPORT | 7. PERIOD COVERED BY THIS REPORT (inclusive dates) |                  |        |                        |
|                            | 1 November 1955 to 7 June 1956                     |                  |        |                        |

#### SECTION II (To be completed by field supervisor)

|  |   |
|--|---|
| 1. CURRENT POSITION  | 2. DATE ASSUMED RESPONSIBILITY FOR POSITION |
| I.O. (E-1)   | April, 1954                                 |
| 3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency) |   |

|                     |                            |
|---------------------|----------------------------|
| BY                  | DATE                       |
| <i>[Signature]</i>  | 11 JAN 1957                |
| Posted Pos. Control |                            |
| Reviewed by PUD     | <i>[Signature]</i> 1-14-57 |

#### SECTION III (To be completed at headquarters only)

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

|  |   |
|--|---|
| AUTHENTICATION OF REPORT AND SIGNATURES:   |   |
| 1. NAME OF RATER (True)  | 2. NAME OF REVIEWING OFFICIAL IN FIELD (True)   |
|  |   |
| 3. THIS REPORT <input type="checkbox"/> WAS <input checked="" type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED. |   |
| 4. DATE REPORT AUTHENTICATED AT HQS.   | 5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE FITNESS REPORT AND SIGNATURES |
| 7 Dec 1956   | <i>[Signature]</i> CFF/1  |

DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY

**SECRET**  
(When Filled In) **OFFICE OF PERSONNEL**  
**SECTION IV**

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements. **JAN 10 10 40 AM '57** apply in each of these to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks to allow you to make finer distinctions if you so desire. Look at the statement on the left, then check the category on the right which best tells how such a statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means **PAJ RADM** no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

| STATEMENTS  | CATEGORIES |              |                |                             |                                |                                    |                                  |
|---|------------|--------------|----------------|-----------------------------|--------------------------------|------------------------------------|----------------------------------|
|   |            | NOT OBSERVED | DOES NOT APPLY | APPLIES TO A LIMITED DEGREE | APPLIES TO A REASONABLE DEGREE | APPLIES TO AN ABOVE AVERAGE DEGREE | APPLIES TO AN OUTSTANDING DEGREE |
| A. ABLE TO SEE ANOTHER'S POINT OF VIEW.             | SAMPLES    |              |                | X                           |                                |                                    |                                  |
| B. PRACTICAL.                                       |            |              |                |                             |                                | X                                  |                                  |
| 1. A GOOD REPORTER OF EVENTS.                       |            |              |                |                             |                                | X                                  |                                  |
| 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.  |            |              |                |                             | X                              |                                    |                                  |
| 3. CAUTIOUS IN ACTION.                              |            |              |                |                             |                                | X                                  |                                  |
| 4. HAS INITIATIVE.                                  |            |              |                |                             |                                | X                                  |                                  |
| 5. UNEMOTIONAL.                                     |            |              |                |                             |                                | X                                  |                                  |
| 6. ANALYTIC IN HIS THINKING.                        |            |              |                |                             | X                              |                                    |                                  |
| 7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS. |            |              |                |                             |                                |                                    | X                                |
| 8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.     |            |              |                |                             |                                |                                    | X                                |
| 9. HAS SENSE OF HUMOR.                              |            |              |                |                             |                                |                                    | X                                |
| 10. KNOWS WHEN TO SEEK ASSISTANCE.                  |            |              |                |                             |                                |                                    | X                                |
| 11. CALM.   |            |              |                |                             |                                | X                                  |                                  |
| 12. CAN GET ALONG WITH PEOPLE.                      |            |              |                |                             |                                |                                    | X                                |
| 13. MEMORY FOR FACTS.                               |            |              |                |                             |                                |                                    | X                                |
| 14. GETS THINGS DONE.                               |            |              |                |                             |                                | X                                  |                                  |
| 15. KEEPS ORIENTED TOWARD LONG TERM GOALS.          |            |              |                |                             |                                | X                                  |                                  |
| 16. CAN COPE WITH EMERGENCIES.                      |            |              |                |                             | X                              |                                    |                                  |
| 17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.           |            |              |                |                             |                                |                                    | X                                |
| 18. HAS STAMINA; CAN KEEP GOING A LONG TIME.        |            |              |                |                             |                                |                                    | X                                |
| 19. HAS WIDE RANGE OF INFORMATION.                  |            |              |                |                             |                                |                                    | X                                |
| 20. SHOWS ORIGINALITY.                              |            |              |                |                             | X                              |                                    |                                  |
| 21. ACCEPTS RESPONSIBILITIES.                       |            |              |                |                             | X                              |                                    |                                  |
| 22. ADMITS HIS ERRORS.                              |            |              |                |                             |                                |                                    | X                                |
| 23. RESPONDS WELL TO SUPERVISION.                   |            |              |                |                             | X                              |                                    |                                  |
| 24. EVEN DISPOSITION.                               |            |              |                |                             |                                |                                    | X                                |
| 25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.      |            |              |                | X                           |                                |                                    |                                  |



SECRET  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS.  
Office of Personnel  
Performances hampered by preoccupation with personal and professional status in the Agency, unwarranted in terms of both personal popularity and quality of work.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?  NO  YES. JAN 10, 10 49 AM '57

Shrinks from assuming full responsibility. Fits well into a system of checks and balances.

MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?  
In view of prospective return to field assignment, should keep up his knowledge of the language. Tradecraft training designed to develop a basic facility for developing personal contacts into a control relationship and for turning contacts over effectively to other ops personnel.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- 1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA?  NO  YES; IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE ORGANIZATION. WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION. IRRKED BY RESTRICTIONS. REGARDS ORGANIZATION AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION. BOTHERED BY MINOR FRUSTRATIONS. WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT. HAS "WAIT AND SEE" ATTITUDE. WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION. MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION. THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION. HARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION. WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating: skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY. WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE. DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE. HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET



SECRET

**CUMULATIVE TRAINING RECORD**

DATE  
**1 25 October 1956**

NAME: \_\_\_\_\_

PROJECTED PERSONNEL ACTION

|           |                                     |            |                 |
|-----------|-------------------------------------|------------|-----------------|
| PROMOTION | <input checked="" type="checkbox"/> | ASSIGNMENT | OTHER (Explain) |
| ROTATION  |                                     | TRAVEL     |                 |

FROM: **I.O. (VI), GS-14,** \_\_\_\_\_

TO: **Area Ops Off, GS-14, Hqs,** \_\_\_\_\_

FOO  
**Boyt 52**

| X | COURSE   | DATE TAKEN                   | X | COURSE                             | DATE TAKEN        |
|---|--|------------------------------|---|------------------------------------|-------------------|
|   | BASIC ORIENT.<br>ALSO BIC, BITC,<br>ROC, BTP, PH I |                              |   | BIC OPS.<br>1 2 3 4 5              |                   |
|   | CLAND. W & T<br>ALSO OC, PH II                     | <b>27 Oct-<br/>26 Nov 52</b> |   | WAR. OPS<br>1 2 3 4 5              |                   |
|   | CLAND. OPS.<br>ALSO AIC, AITC,<br>ADC, CAI, PH III |                              |   | CLAND. FLD. ACT.<br>1 2 3 4 5 6    |                   |
|   | RESISTANCE OPS<br>ALSO PH, I-III,<br>III, RAFF     |                              |   | SURVIVAL<br>1 2 3 4 5 6            |                   |
|   | CLAND. SERV. BTP                                   | <b>19 Oct 56</b>             |   | BASIC PHOTO                        |                   |
|   | WORLD COMMUNISM                                    |                              |   | DOCUMENTATION                      | <b>22 Oct 52</b>  |
|   | ANTI-COMM. OPS.                                    |                              |   | LOCKS                              |                   |
|   | ADMIN PROCEDURES                                   |                              |   | SECRET WRITING                     | <b>8-9 Dec 52</b> |
|   | OPS. SUPPORT                                       |                              |   | FLAPS & SEALS                      |                   |
|   | TRACRAFT PHASE<br>ADMIN PHASE                      |                              |   | SMALL ARMS. FAM.<br>OTHER TRAINING |                   |
|   | REPORTS  |                              |   | BIC                                | <b>1-5 Dec 52</b> |
|   | ORDER OF BATTLE                                    |                              |   |                                    |                   |
|   | COUNTERESPIONAGE                                   |                              |   |                                    |                   |
|   | AGY. COUNTER-<br>ESPIONAGE                         |                              |   |                                    |                   |
|   | OPS. SECURITY                                      |                              |   |                                    |                   |
|   | WAR PLANS  |                              |   |                                    |                   |
|   | CLAND. POL. RAFF                                   |                              |   |                                    |                   |
|   | STAYBEHIND OPS.                                    |                              |   |                                    |                   |
|   | TECH. DEV.<br>ORIENT.                              |                              |   |                                    |                   |
|   | INSTR. TECH.                                       |                              |   |                                    |                   |
|   | EVASION-ESCAPE                                     |                              |   |                                    |                   |
|   | SAB. OPS.  |                              |   |                                    |                   |
|   | INVEST. TECH.<br>ALSO CI TECH.                     |                              |   |                                    |                   |
|   | ADMIN REFRESHER                                    |                              |   |                                    |                   |
|   | ROC. IMPROVE.                                      |                              |   |                                    |                   |
|   | BASIC SUPV.  |                              |   |                                    |                   |
|   | BASIC UGMT.  |                              |   | PRE-TEST                           |                   |
|   | BALLOON OPS.                                       |                              |   | ASSESSMENT                         |                   |

REMARKS:

1. CONSTRUCTIVE CREDIT (CC) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS  BACKGROUND  EXPERIENCE  TRAINING.

2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.

TRAINING OFFICER COMMENTS:

A. THIS DOES (NOT) MEET TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION.

NO FURTHER TRAINING RECOMMENDED AT THIS TIME.

B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN "X". THE COMPLETION OF WHICH WILL SATISFY BASIC QUALIFYING STANDARDS.

C. UNLESS SUBJECT HAS HAD PREVIOUS HQ. OR FIELD EXPERIENCE WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE  QUALIFYING  REFRESHER TRAINING AS CHECKED AT THE LEFT:  SOONEST  UPON RETURN TO HQ.

D. WAIVER AND CC. SHOULD BE REQUESTED FOR THOSE COURSES MARKED WITH A "W".

E. RECOMMENDATIONS FOR ADDITIONAL TRAINING WERE MADE \_\_\_\_\_ DATE \_\_\_\_\_ THESE RECOMMENDATIONS HAVE NOT BEEN MET.

DIVISION TRAINING OFFICER  
*[Signature]*

STAFF TRAINING OFFICER  
\_\_\_\_\_

TO: Personnel Officer, \_\_\_\_\_

FROM: Career Management Officer

The above projected personnel action has been  approved  disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.

Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.

DATE: **14 Nov 56**

SIGNATURE OF CAREER MANAGEMENT OFFICER: \_\_\_\_\_

SECRET

TRAINING REPORT

CLANDESTINE SERVICES REVIEW NO. 14

| NAME                                     | SEX               | DATES OF COURSE                | NO. OF STUDENTS |
|--|-------------------|--------------------------------|-----------------|
| [REDACTED]                               | Male              | 24 September - 12 October 1952 | 42              |
|  | END DATE          | GRADE OR TERM                  | OFFICE          |
| [REDACTED]                               | 29 September 1952 | GS-14                          | FE-1            |
| PROJECTED ASSIGNMENT OR PRESENT POSITION |                   |                                |                 |
| Chief, [REDACTED]                        |                   | FE-1                           |                 |

I. OBJECTIVES

The objectives of this course are to provide familiarization with 1) the Clandestine Services' functional structure, current mission, operational programs, and support facilities; 2) other Agency officers and their capacity to support the Clandestine Services. It is not intended to impart basic operational knowledge, but is designed to make the returning case officer current with recent developments.

II. SPECIFIC CHARACTERISTICS OF COURSE:

A description of current policy, objectives, organization, programs showing operational emphasis, methods of personnel management, fiscal administration, and existing capabilities for providing operational and intelligence support was presented by means of lectures, tours, and selected reading material. The course involved three weeks.

III. CERTIFICATION OF COURSE COMPLETION:

[REDACTED]

has attended the entire course.

FOR THE DIRECTOR OF TRAINING:

[REDACTED]

Chief, Instructor  
Clandestine Services Review

SECRET

13

SECRET  
(When Filled In)

FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:  
1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and  
2. A periodic record of job performance as an aid to the effective utilization of personnel.

INSTRUCTIONS

TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER: Consult current field administrative instructions regarding the initiation and transmittal of this report to headquarters.

TO THE FIELD SUPERVISOR: Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED

SECTION I

1. LAST NAME: [ ] USE ONLY: [ ] 2. SEX: M 3. SERVICE DESIGNATION: DI

4. GRADE: GS-14 5. STATION DESIGNATION (Current): [ ]

6. DUE DATE OF THIS REPORT: 30 October 1955 7. PERIOD COVERED BY THIS REPORT (Inclusive dates): 31 October 1954 to 30 October 1955

SECTION II (To be completed by field supervisor)

1. CURRENT POSITION: I. C. (FI) 2. DATE ASSUMED RESPONSIBILITY FOR POSITION: April, May, 1954

3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency)

a. As Acting Chief, FI, has been responsible for supervising all FI activities of the Base, and for coordinating those activities with Chief, PP.

b. [ ]  
c. [ ]

BY: [Signature] DATE: Sept 56  
Posted Post Control: [ ]  
Reviewed by PUD: [Signature]

SECTION III (To be completed at headquarters only)

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

AUTHENTICATION OF REPORT AND SIGNATURES

1. NAME OF RATER (True): Robert H. LINN 2. NAME OF RECEIVING OFFICIAL IN FIELD (True): [ ]  
3. THIS REPORT WAS [ ] WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED: [X]  
4. DATE REPORT AUTHENTICATED AT HQC: 23 March 1956 5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL DIRECTOR AT HEADQUARTERS: [ ]

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

**SECRET**  
(When Filled In)

**SECTION IV**

**OFFICE OF PERSONNEL**

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The descriptive words are to be interpreted literally.

On the left hand side of the page below are a series of statements that apply in one degree or another to most people. On the right hand side of the page are four major categories of descriptions. Each category is divided into three small blocks; this is to allow you to make finer distinctions, if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have a definite opinion that the description is not at all suited to the individual.

| STATEMENTS  | SAMPLES | CATEGORIES   |                |                             |                                |                                    |                                  |
|---|---------|--------------|----------------|-----------------------------|--------------------------------|------------------------------------|----------------------------------|
|   |         | NOT OBSERVED | DOES NOT APPLY | APPLIES TO A LIMITED DEGREE | APPLIES TO A REASONABLE DEGREE | APPLIES TO AN ABOVE AVERAGE DEGREE | APPLIES TO AN OUTSTANDING DEGREE |
| A. ABLE TO SEE ANOTHER'S POINT OF VIEW.             |         |              |                | X                           |                                |                                    |                                  |
| B. PRACTICAL.                                       |         |              |                |                             |                                | X                                  |                                  |
| 1. A GOOD REPORTER OF EVENTS.                       |         |              |                |                             |                                | X                                  |                                  |
| 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.  |         |              |                |                             |                                |                                    | X                                |
| 3. CAUTIOUS IN ACTION.                              |         |              |                |                             | X                              |                                    |                                  |
| 4. HAS INITIATIVE.                                  |         |              |                |                             |                                | X                                  |                                  |
| 5. UNEMOTIONAL.                                     |         |              |                | X                           |                                |                                    |                                  |
| 6. ANALYTIC IN HIS THINKING.                        |         |              |                |                             |                                | X                                  |                                  |
| 7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS. |         |              |                |                             |                                | X                                  |                                  |
| 8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.     |         |              |                |                             |                                |                                    | X                                |
| 9. HAS SENSE OF HUMOR.                              |         |              |                |                             |                                |                                    | X                                |
| 10. KNOWS WHEN TO SEEK ASSISTANCE.                  |         |              |                |                             |                                | X                                  |                                  |
| 11. CALM.   |         |              |                | X                           |                                |                                    |                                  |
| 12. CAN GET ALONG WITH PEOPLE.                      |         |              |                |                             |                                | X                                  |                                  |
| 13. MEMORY FOR FACTS.                               |         |              |                |                             |                                | X                                  |                                  |
| 14. GETS THINGS DONE.                               |         |              |                |                             |                                |                                    | X                                |
| 15. KEEPS ORIENTED TOWARD LONG TERM GOALS.          |         |              |                |                             |                                | X                                  |                                  |
| 16. CAN COPE WITH EMERGENCIES.                      |         |              |                |                             |                                | X                                  |                                  |
| 17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.           |         |              |                |                             |                                |                                    | X                                |
| 18. HAS STAMINAL CAN KEEP GOING A LONG TIME.        |         |              |                |                             |                                | X                                  |                                  |
| 19. HAS WIDE RANGE OF INFORMATION.                  |         |              |                |                             |                                | X                                  |                                  |
| 20. SHOWS ORIGINALITY.                              |         |              |                |                             |                                | X                                  |                                  |
| 21. ACCEPTS RESPONSIBILITIES.                       |         |              |                |                             |                                | X                                  |                                  |
| 22. ADMITS HIS ERRORS.                              |         |              |                |                             |                                | X                                  |                                  |
| 23. RESPONDS WELL TO SUPERVISION.                   |         |              |                |                             |                                | X                                  |                                  |
| 24. EVEN DISPOSITION.                               |         |              |                | X                           |                                |                                    |                                  |
| 25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT.      |         |              |                |                             |                                | X                                  |                                  |



SECRET

(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGHS ALL OTHER CONSIDERATIONS.  
Versatility in dealing on a friendly and extremely effective basis with all kinds of people, particularly those in high level positions.

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?  NO  YES. IF YES, WHY?  
APR 3 1 58 PM '56  
MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?  
P&F training, and refresher course, if available, in FI ops.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person): Subject has an excellent knowledge of the area, its people, and language and is able to use this knowledge with great resultant benefits to his work.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.  
 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.  
 2. BARELY ADEQUATE IN PERFORMANCE, ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING. HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.  
 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY, OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.  
 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.  
 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.  
 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.  
IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA?  NO  YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.  
 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY. WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.  
 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION. IMPOSED BY RESTRICTIONS. REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.  
 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION. BOTHERED BY MINOR FRUSTRATIONS. WILL QUIT IF THESE CONTINUE.  
 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT. HAS "WAIT AND SEE" ATTITUDE. WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.  
 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION. MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION. THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.  
 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION. BARRING AN UNEXPECTED, OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO HAVE A CAREER IN THE ORGANIZATION.  
 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION. WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities, as normally indicated by promotion.  
 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.  
 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.  
 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.  
 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.  
 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.  
 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating, skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.  
 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.  
 2. OF DOUBTFUL SUITABILITY. WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.  
 3. A BARELY ACCEPTABLE EMPLOYEE. DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.  
 4. A TYPICAL EMPLOYEE. HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.  
 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.  
 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.  
 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

SECRET  
(When Filled In)

### FIELD FITNESS REPORT

The Fitness Report is an important factor in organization personnel management. It seeks to provide:  
1. The organization selection board with information of value when considering the application of an individual for membership in the career staff; and  
2. A periodic record of job performance as an aid to the effective utilization of personnel.

#### INSTRUCTIONS

**TO THE FIELD ADMINISTRATIVE OR PERSONNEL OFFICER:** Consult current field administrative instructions regarding the initiation and transmittal of this report to Headquarters.

**TO THE FIELD SUPERVISOR:** Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as

revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate, if practicable, with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is assumed that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a DATE oral way he knows where he stands.

Posted For Control **B7 2-15-55**

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING

**A**

#### SECTION I

|                              |  |               |        |                        |
|------------------------------|--|---------------|--------|------------------------|
| 1. FOR HEADQUARTERS USE ONLY |  | DATE OF BIRTH | 2. SEX | 3. SERVICE DESIGNATION |
|                              |  |               | M      | 00-1035D-P1            |
| 4. GRADE                     | 5. STATION DESIGNATION (Current)                     |               |        |                        |
| GS-11                        |  |               |        |                        |
| 6. DUE DATE OF THIS REPORT   | 7. PERIOD (January 1, 1953 - 30 October 1954)        |               |        |                        |
| 30 Sept. 1954                | 15 Nov. 1953 to 30 October 1954 (present supervisor) |               |        |                        |

#### SECTION II (To be completed by field supervisor)

|  |   |
|--|---|
| 1. CURRENT POSITION  | 2. DATE ASSUMED RESPONSIBILITY FOR POSITION |
| 10 (FI)<br>Acting Deputy for RUFIRE; Chief of Liaison  | 0136-S1<br>April-May 1954                   |
| 3. STATE THE SPECIFIC ASSIGNMENTS OR TASKS WHICH ARE TYPICAL OF THOSE GIVEN TO THE EMPLOYEE DURING THE PAST THREE TO SIX MONTHS (List in order of frequency) |   |

Subject is Acting Deputy for RUFIRE activities within the Mission. As such, he is responsible for organizing, directing, and coordinating the three sections charged with RUFIRE duties [redacted] as well as the Intelligence Staff which is in turn responsible for requirements, central intelligence files, CE carding and filing, and the preparation and dissemination of reports. Subject is also Chief of Liaison and in his capacity directs and coordinates the work of four Liaison sections dealing with both U.S. [redacted]

#### SECTION III (To be completed at Headquarters only)

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

|  |   |
|--|---|
| AUTHENTICATION OF REPORT AND SIGNATURES  |   |
| 1. NAME OF BATER (Type)  | 2. NAME OF REVIEWING OFFICIAL IN FIELD (Type) |
|  |   |
| 3. THIS REPORT WAS <input type="checkbox"/> WAS <input checked="" type="checkbox"/> WAS NOT SHOWN TO THE INDIVIDUAL BEING RATED. |   |
| 4. DATE REPORT AUTHENTICATED AT HQS.   |   |
| 16 Jan 55  |   |
| 5. NAME AND SIGNATURE OF ADMINISTRATIVE OR PERSONNEL OFFICER AT HEADQUARTERS   |   |
| [redacted]   |   |

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

SECRET  
(When Filled In)

FEB 9 10 31 AM '55

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. ~~IN THE ROOM~~

On the left hand side of the page below are a series of statements that apply in some degree to most people. On the right hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

| STATEMENTS  | CATEGORIES   |                |                             |                                |                                    |                                  |
|---|--------------|----------------|-----------------------------|--------------------------------|------------------------------------|----------------------------------|
|   | NOT OBSERVED | DOES NOT APPLY | APPLIES TO A LIMITED DEGREE | APPLIES TO A REASONABLE DEGREE | APPLIES TO AN ABOVE AVERAGE DEGREE | APPLIES TO AN OUTSTANDING DEGREE |
| A. ABLE TO SEE ANOTHER'S POINT OF VIEW.             |              |                | X                           |                                |                                    |                                  |
| B. PRACTICAL.                                       |              |                |                             |                                | X                                  |                                  |
| 1. A GOOD REPORTER OF EVENTS.                       |              |                |                             |                                |                                    | X                                |
| 2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.  |              |                |                             |                                |                                    | X                                |
| 3. CAUTIOUS IN ACTION.                              |              |                |                             |                                | X                                  |                                  |
| 4. HAS INITIATIVE.                                  |              |                |                             |                                |                                    | X                                |
| 5. UNEMOTIONAL.                                     |              |                |                             | X                              |                                    |                                  |
| 6. ANALYTIC IN HIS THINKING.                        |              |                |                             |                                | X                                  |                                  |
| 7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS. |              |                |                             |                                |                                    | X                                |
| 8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.     |              |                |                             |                                |                                    | X                                |
| 9. HAS SENSE OF HUMOR.                              |              |                |                             |                                |                                    | X                                |
| 10. KNOWS WHEN TO SEEK ASSISTANCE.                  |              |                |                             |                                |                                    | X                                |
| 11. CALM.   |              |                |                             | X                              |                                    |                                  |
| 12. CAN GET ALONG WITH PEOPLE.                      |              |                |                             |                                |                                    | X                                |
| 13. MEMORY FOR FACTS.                               |              |                |                             |                                |                                    | X                                |
| 14. GETS THINGS DONE.                               |              |                |                             |                                |                                    | X                                |
| 15. KEENLY ORIENTED TOWARD LONG TERM GOALS.         |              |                |                             |                                | X                                  |                                  |
| 16. CAN COPE WITH EMERGENCIES.                      |              |                |                             |                                | X                                  |                                  |
| 17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.           |              |                |                             |                                |                                    | X                                |
| 18. HAS STAMINA; CAN KEEP GOING A LONG TIME.        |              |                |                             |                                |                                    | X                                |
| 19. HAS WIDE RANGE OF INFORMATION.                  |              |                |                             |                                |                                    | X                                |
| 20. SHOWS ORIGINALITY.                              |              |                |                             |                                |                                    | X                                |
| 21. ACCEPTS RESPONSIBILITIES.                       |              |                |                             |                                |                                    | X                                |
| 22. ADMITS HIS ERRORS.                              |              |                |                             |                                |                                    | X                                |
| 23. RESPONDS WELL TO SUPERVISION.                   |              |                |                             |                                |                                    | X                                |
| 24. EASY DISPOSITION.                               |              |                |                             |                                | X                                  |                                  |
| 25. LIKES TO DO HIS JOB WITHOUT SPECIAL PROM.       |              |                |                             |                                | X                                  |                                  |

SECRET





SECRET  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS:

High capacity for competent and rapid accomplishment in almost any intellectual field, OFFICE OF PERSONNEL

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION?  NO  YES. IF YES, ON FEB 9 10 31 AM '55

Subject has excellent balance in supervising others, but often requires guidance and direction in something in which he personally is closely concerned. MAIL ROOM

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

G&P course; refresher course in KUPIRE techniques.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

Subject makes an invaluable contribution through his knowledge of Japan, and through the continuity resulting from his willingness to remain for an indefinite period in the area.

SECTION VI

Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- 1. DOES NOT PERFORM DUTIES ADEQUATELY. HE IS INCOMPETENT.
- 2. BADLY ADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA?  NO  YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the organization.

- 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY. WILL DEFINITELY LEAVE THE ORGANIZATION AT THE FIRST OPPORTUNITY.
- 2. HAS STRONG NEGATIVE ATTITUDE TOWARD ORGANIZATION. TIRED OF RESTRICTIONS. REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE ORGANIZATION. DETERED BY MINOR FRUSTRATIONS. WILL QUIT IF THESE CONTINUE.
- 4. HIS ATTITUDE TOWARD THE ORGANIZATION IS INDIFFERENT. HAS "WAIT AND SEE" ATTITUDE. WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD ORGANIZATION. MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR ORGANIZATION. THINKS IN TERMS OF A CAREER IN THE ORGANIZATION.
- 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE ORGANIZATION. MARKING AN UNEXPECTED OUTSIDE OPPORTUNITY. WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE ORGANIZATION.
- 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE ORGANIZATION. WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE ORGANIZATION.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities than normally indicated by promotion.

- 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- 2. OF DOUBTFUL SUITABILITY. WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- 3. A BARELY ACCEPTABLE EMPLOYEE. DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- 4. A TYPICAL EMPLOYEE. HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE ORGANIZATION.
- 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION.
- 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION.

SECRET

**IMPORTANT  
EMPLOYEE INSTRUCTIONS  
ON PAGE 4**

**LIFE INSURANCE COVERAGE**  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON PAGE 2**

**TO COMPLETE THIS FORM—**

**1 FOLLOW THESE GENERAL INSTRUCTIONS:**

- Read page 4 carefully before you fill in the form.
- Fill in **BOTH COPIES** of the form. Type or print in ink.
- Do not detach.

**2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

|  |         |          |   |                        |
|--|---------|----------|---|------------------------|
| NAME (last)  | (first) | (middle) | DATE OF BIRTH (month, day, year)        | SOCIAL SECURITY NUMBER |
|  |         |          |   |                        |
| EMPLOYING DEPARTMENT OR AGENCY   |         |          | AGENCY LOCATION (City, State, ZIP Code) |                        |
| HAVE YOU EVER BEFORE FILED THIS FORM? <input type="checkbox"/> YES <input type="checkbox"/> NO                               |         |          |   |                        |
| If "YES," your last such form remains in effect and you should not file this new form unless you want to change the old one. |         |          |   |                        |

**3** By law, a person, who can be covered, automatically receives regular life insurance, unless he waives all coverage. You have the choice of waiving all coverage, increasing your life insurance coverage through additional optional insurance, or declining the additional optional insurance. So, **READ CAREFULLY AND THEN**

**MARK AN "X" IN ONE OF THE BOXES BELOW (DO NOT MARK MORE THAN ONE):**

Mark here →  **A** I WANT THE \$10,000 OPTIONAL INSURANCE in addition to my regular insurance. I authorize deductions to pay the full cost.  
for **BOTH** OPTIONAL AND REGULAR insurance.

Mark here →  **B** I DO NOT WANT THE \$10,000 OPTIONAL INSURANCE but I understand I still get my regular insurance. I understand I cannot get optional insurance, unless I: (1) wait at least one year after I sign this form, (2) am under age 50 when I apply, AND (3) give satisfactory medical evidence of insurability.

Mark here →  **C** I DO NOT WANT ANY LIFE INSURANCE NOW. I understand that I cannot get any regular insurance, unless I: (1) wait at least one year after I sign this form, (2) am under age 50 when I apply, AND (3) give satisfactory medical evidence of insurability. I understand I cannot get the \$10,000 optional insurance unless I first have the regular insurance.

**4** DATE AND SIGN. RETURN THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.

SIGNATURE (do not print)

Subject failed to elect optional insurance during the open period.

DATE

14 Apr 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

PERSONNEL  
APR 14 10 24 AM '68  
PERSONNEL

See Table of Effective Dates on Back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

STANDARD FORM No. 176  
MARCH 1973  
FPM Supplement 870-1  
176-103

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO. [REDACTED] NAME  
LAST FIRST MIDDLE

INSTRUCTIONS  
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

PCS DATES OF SERVICE

| ARRIVAL O/S |       |       | DEPARTURE O/S |       |       | TYPE OF DATA  | CODE | O/P USE ONLY | COUNTRY |         |
|-------------|-------|-------|---------------|-------|-------|---|------|--------------|---------|---------|
| MONTH       | DAY   | YEAR  | MONTH         | DAY   | YEAR  |   |      |              | CODE    | AREA(S) |
| 25-26       | 27-28 | 29-30 | 31-32         | 33-34 | 35-36 | 1 - PCS (Basic)<br>2 - CORRECTION<br>3 - CANCELLATION | 37   | 38 39        |         | 40-42   |
|             |       |       |               |       |       |   |      |              |         |         |

TDY DATES OF SERVICE

| ARRIVAL O/S |       |       | DEPARTURE O/S |       |       | TYPE OF DATA  | CODE | O/P USE ONLY | AREA(S) |         |
|-------------|-------|-------|---------------|-------|-------|---|------|--------------|---------|---------|
| MONTH       | DAY   | YEAR  | MONTH         | DAY   | YEAR  |   |      |              | CODE    | AREA(S) |
| 25-26       | 27-28 | 29-30 | 31-32         | 33-34 | 35-36 | 2 - TDY (Basic)<br>4 - CORRECTION<br>0 - CANCELLATION | 37   | 38 39        | EUROPE  | 40-42   |
| 0           | 5     | 1     | 6             | 7     | 3     |   | 2    |              |         | 8 0 1   |

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

|  |   |
|--|---|
| <input checked="" type="checkbox"/> TRAVEL VOUCHER | DISPATCH                                  |
| CABLE  | DUTY STATUS OR TIME AND ATTENDANCE REPORT |
| OTHER (Specify)                                    |   |

DOCUMENT IDENTIFICATION NO. **WOCAD-000091-73** DOCUMENT DATE/PERIOD **05/15/73 - 06/17/73**

REMARKS

|                      |                                      |  |
|----------------------|--------------------------------------|--|
| PREPARED BY<br>DCO   | REPORT INDICATED ON CONTROL DOCUMENT | AGREE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED |
| C & L DIVISION, CTRM | DATE<br><b>MIL 9/19/73</b>           | SIGNATURE  |
| C & T DIVISION       |                                      |  |

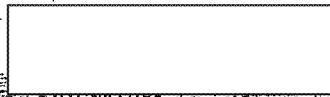
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

S-E-C-R-E-T

CERTIFICATION OF ATTENDANCE

NAME OF SCHOOL OR FACILITY: Federal Executive Institute  
COURSE : Follow-up Seminar  
COURSE DATES : 10 December 1970 (1 day only)  
GRADE (IF GIVEN) : None  
TRAINING REQUEST NUMBER : 031297

I certify the above to be true and correct to the best of my knowledge.



SIGNATURE

11/12/71  
DATE

NOTE: This form is to be used only when the facility attended does not give official completion information.

TRAINING COMPLETED

Request No. 031297

Date 7/12/71

S-E-C-R-E-T

UNITED STATES GOVERNMENT

U.S. CIVIL SERVICE COMMISSION

# Memorandum

**Subject:** Completion of "The Residential Program in Executive Education" at the Federal Executive Institute, Charlottesville, Virginia

**Date:** July 15, 1970  
**In Reply Refer To:**

**From:** FRANK P. SHERWOOD *Frank Sherwood*  
Director, Federal Executive Institute

**Your Reference:**

**To:** [Redacted]  
Registrar, Office of Training  
Central Intelligence Agency  
Washington, D. C. 20505

This is official notice that [Redacted] has satisfactorily completed the eight-week session of "The Residential Program in Executive Education" at the Federal Executive Institute, Charlottesville, Virginia. This session of that educational program was held from May 10 - July 2, 1970. A certificate of completion has been issued to the above named person. One copy of this memorandum is intended for filing in the employee's official personnel folder and the other copy for routing to the employee's immediate supervisor.

TRAINING COMPLETED  
Request # 627215  
Date 7/15/70

Keep Freedom in Your Future With U.S. Savings Bonds

SECRET  
(When Filled In)

QUALIFICATIONS UPDATE

GS-16 D

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room SE-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. [NAME (Last-First-Middle)] DATE OF BIRTH

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED ADDRESS (City, State, Country) YEARS ATTENDED (From-To) GRADUATE  YES  NO

COLLEGE OR UNIVERSITY STUDY

| NAME AND LOCATION OF COLLEGE OR UNIVERSITY | SUBJECT |       | YEARS ATTENDED FROM-TO | DEGREE RECEIVED | YEAR RECEIVED | NO. SEM/OTR HRS. (Specify) |
|--|---------|-------|------------------------|-----------------|---------------|----------------------------|
|  | MAJOR   | MINOR |                        |                 |               |                            |
| 1.   |         |       |                        |                 |               |                            |
| 2.   |         |       |                        |                 |               |                            |

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

| NAME AND ADDRESS OF SCHOOL | STUDY OR SPECIALIZATION | FROM | TO | NO. OF MONTHS |
|----------------------------|-------------------------|------|----|---------------|
|                            |                         |      |    |               |

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

| NAME AND ADDRESS OF SCHOOL | STUDY OR SPECIALIZATION | FROM | TO | NO. OF MONTHS |
|----------------------------|-------------------------|------|----|---------------|
|                            |                         |      |    |               |

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: \_\_\_\_\_  
2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)  
3. DATE OF BIRTH 4. PLACE OF BIRTH (City, State, Country)  
5. OCCUPATION 6. PRESENT EMPLOYER  
7. CITIZENSHIP 8. FORMER CITIZENSHIP(S) COUNTRY(IES) 9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

| NAME  | RELATIONSHIP | DATE AND PLACE OF BIRTH | CITIZENSHIP | PERMANENT ADDRESS |
|---|--------------|-------------------------|-------------|-------------------|
| 1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE |              |                         |             |                   |
| 2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE |              |                         |             |                   |

**SECRET**  
(When Filled In)

| SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL  |                               |  |                       |  |       |   |            |
|---|-------------------------------|--|-----------------------|--|-------|---|------------|
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE | DATES OF TRAVEL OR RESIDENCE                   | DATE & PLACE OF STUDY | KNOWLEDGE ACQUIRED BY  |       |   |            |
|   |                               |  |                       | TRAVEL   | STUDY | OTHER ASSIGNMENT                            | ASSIGNMENT |
|   |                               |  | APR 9 9 37 AM '69     |  |       |   |            |
|   |                               |  |                       |  |       |   |            |
| SECTION VI TYPING AND STENOGRAPHIC SKILLS   |                               |  |                       |  |       |   |            |
| 1. TYPING (WPM) 2. SHORTHAND (WPM) 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM   |                               |  |                       |  |       |   |            |
| <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY: |                               |  |                       |  |       |   |            |
| SECTION VII SPECIAL QUALIFICATIONS  |                               |  |                       |  |       |   |            |
| PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.                                   |                               |  |                       |  |       |   |            |
| SECTION VIII MILITARY SERVICE   |                               |  |                       |  |       |   |            |
| CURRENT DRAFT STATUS  |                               |  |                       |  |       |   |            |
| 1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?   |                               |  |                       | 2. NEW CLASSIFICATION  |       |   |            |
| <input type="checkbox"/> YES <input type="checkbox"/> NO  |                               |  |                       |  |       |   |            |
| 3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS   |                               |  |                       | 4. IF DEFERRED, GIVE REASON  |       |   |            |
| MILITARY RESERVE, NATIONAL GUARD STATUS   |                               |  |                       |  |       |   |            |
| CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG   |                               |  |                       |  |       |   |            |
| <input type="checkbox"/> ARMY   |                               | <input type="checkbox"/> MARINE CORPS          |                       | <input type="checkbox"/> COAST GUARD   |       | <input type="checkbox"/> NATIONAL GUARD     |            |
| <input type="checkbox"/> NAVY   |                               | <input type="checkbox"/> AIR FORCE             |                       | <input type="checkbox"/>   |       | <input type="checkbox"/> AIR NATIONAL GUARD |            |
| 1. CURRENT RANK, GRADE OR RATE  |                               | 2. DATE OF APPOINTMENT IN CURRENT RANK         |                       | 3. EXPIRATION DATE OF CURRENT OBLIGATION   |       |   |            |
|   |                               |  |                       |  |       |   |            |
| 4. CHECK CURRENT RESERVE CATEGORY   |                               |  |                       | 5. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED  |       |   |            |
| <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active)  |                               |  |                       | <input type="checkbox"/> STANDBY (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED |       |   |            |
| 5. MILITARY MOBILIZATION ASSIGNMENT   |                               |  |                       |  |       |   |            |
| MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)  |                               |  |                       |  |       |   |            |
| NAME AND ADDRESS OF SCHOOL  |                               | STUDY OR SPECIALIZATION                        |                       | DATE COMPLETED   |       |   |            |
|   |                               |  |                       |  |       |   |            |
|   |                               |  |                       |  |       |   |            |
| SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS   |                               |  |                       |  |       |   |            |
| NAME AND CHAPTER  |                               | ADDRESS (Number, Street, City, State, Country) |                       |  |       | DATE OF MEMBERSHIP                          |            |
|   |                               |  |                       |  |       | FROM TO                                     |            |
|   |                               |  |                       |  |       |   |            |
|   |                               |  |                       |  |       |   |            |
| SECTION X REMARKS   |                               |  |                       |  |       |   |            |
|   |                               |  |                       |  |       |   |            |
|   |                               |  |                       |  |       |   |            |
| DATE  |                               | SIGNATURE                                      |                       |  |       |   |            |
| 4 APR 1969  |                               |  |                       |  |       |   |            |

**SECRET**



**SECRET**  
(When Filled In)

**VERIFIED RECORD OF OVERSEAS SERVICE**

TO: Office of Personnel, Statistical Reporting Branch, ROOM 5 E 2506 Headquarters

| EMPLOYEE SERIAL NO. | NAME OF EMPLOYEE |       |        | OFFICE/COMPONENT                |
|---------------------|------------------|-------|--------|---------------------------------|
|                     | LAST             | FIRST | MIDDLE |                                 |
| 1-8                 | (Print)          | 7-24  |        | 25-26<br><del>25-26</del><br>43 |

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR.

**PCS DATES OF SERVICE**

| TYPE OF DATA   | CODE | ARRIVAL |       |       | DEPARTURE |       |       | COUNTRY | OMIT |
|----------------|------|---------|-------|-------|-----------|-------|-------|---------|------|
|                |      | MONTH   | DAY   | YEAR  | MONTH     | DAY   | YEAR  |         |      |
| 1. PCS (Basic) | 27   | 28-29   | 30-31 | 32-33 | 34-35     | 36-37 | 38-39 | 40-42   |      |
| 3. CORRECTION  | 1    | 08      | 26    | 64    | 06        | 12    | 66    | Hawaii  | 730  |

**TDY DATES OF SERVICE**

| TYPE OF DATA    | CODE | DEPARTURE |       |       | RETURN |       |       | AREA(S) | OMIT |
|-----------------|------|-----------|-------|-------|--------|-------|-------|---------|------|
|                 |      | MONTH     | DAY   | YEAR  | MONTH  | DAY   | YEAR  |         |      |
| 2. TDY (Basic)  | 27   | 28-29     | 30-31 | 32-33 | 34-35  | 36-37 | 38-39 | 40-42   |      |
| 4. CORRECTION   |      |           |       |       |        |       |       |         |      |
| 6. CANCELLATION |      |           |       |       |        |       |       |         |      |

**SOURCE OF RECORD DOCUMENT**

|   |  |
|---|--|
| <input type="checkbox"/> TRAVEL VOUCHER                     | <input type="checkbox"/> DISPATCH                                  |
| <input checked="" type="checkbox"/> CABINET - Honolulu 3499 | <input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT |
| OTHER (Specify)   |  |

|   |                                      |
|---|--------------------------------------|
| DOCUMENT IDENTIFICATION NO.<br>IN NR 36523A | DOCUMENT DATE/PERIOD<br>13 June 1966 |
|---|--------------------------------------|

REMARKS

|  |                                     |   |
|--|-------------------------------------|---|
| PREPARED BY  | REPORT ANNOTATED ON SOURCE DOCUMENT | ABOVE DATA VERIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED |
| C & L DIVISION                                     | DATE<br>7-2-66                      | SIGN  |
| <input checked="" type="checkbox"/> C & L DIVISION |                                     |   |

Supplement to Staff Agent Personnel Action

25 October 1964

In view of your [redacted] assignment, you have been designated a Staff Agent. The purpose of this Supplement is to call your attention to existing policies which are particularly material to you while you are so designated and to set forth certain obligations incident to your status as an appointed employee.

1. **Payroll Administration.** As indicated in your Staff Agent Personnel Action, your present salary and grade are \$20,245.00 per annum and GS-16<sup>3</sup>, respectively. As an appointed employee of the Government you are entitled to receive and retain only the salary, allowances and other benefits applicable to that status. However, procedural variations will be followed to preserve the security of your position.

(a) The gross emoluments that you receive from your [redacted] activities will be retained by you as an offset against the gross emoluments due you from this organization. If [redacted] emoluments ever exceed those due you from this organization, the overage is to be remitted to this organization on a monthly basis, unless a different period is specified.

(b) Federal income taxes will be withheld, reported and paid in conformance with Agency procedures designed to protect against the unauthorized revelation [redacted] [redacted] You will be briefed thereon prior to your departure.

(c) This organization will deduct from the gross payments due you an amount equivalent to six and one-half percent (6 1/2%) of your gross salary for contribution to the Civil Service Retirement Fund. This amount will be deducted from the differential due you by this organization. If there is no differential or if it is insufficient, you will be required to make direct remittances to this organization in satisfaction of the required contributions.

SECRET

2. Furnished Quarters. If you and your dependents are furnished quarters by the Government while PCS [redacted] you will be charged a reasonable rental therefor, as established under the [redacted] rental rate schedule of this organization.

3. Secrecy. You will be required to keep forever secret this Supplement and all information which you may obtain by reason hereof (unless released in writing by the Government from such obligation), with full knowledge that violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 23 June 1948, as amended, and other applicable laws and regulations.

4. Place of Assignment. This Supplement [redacted] ed upon an assignment [redacted] Any deviation there [redacted] require a new supplement or an amendment thereto.

UNITED STATES GOVERNMENT

BY: [redacted]

SECRET

| CONTRACT INFORMATION AND CHECK LIST  |  | CALL OFFICER   | DIVISION   |
|--|--|--|--|
| <small>INSTRUCTIONS: See HR 10-11 and App. 10, 1000.1 for guidance. Complete this form, attaching all other forms attached. Proceed to Periodic original and file copies for preparation of contract.</small>  |  | <small>TELEPHONE EXTENSION</small><br>Code 23-3000   | <small>DATE</small><br>27 Oct. 64  |
| SECTION I GENERAL  |  |  |  |
| 1. NAME <input checked="" type="checkbox"/> PREVIOUS <input type="checkbox"/> TRUE   | 2A. PROJECT  | 3. ALLOTMENT NO.<br>52-00-0369   | 4. SLOT NO.<br>0261  |
|  | 20. PERMANENT STATION  | 3A. FUNDS  |  |
| 9. PREVIOUS CIA PSEUDONYM OR ALIAS   | 8. INDIVIDUAL HAS BEEN ENGAGED BY CIA OR ITS ALLIED ACTIVITIES IN SOME CAPACITY PRIOR TO THIS CONTRACT. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If yes, describe and include dates and salary.) |  |  |
|  | Staff Employee - Sect. 5 to Present - 08-14 to 08-16   |  |  |
| 7. SECURITY CLEARANCE (Type and date)<br>Staff Clearance   | 1A. MEDICAL CLEARANCE<br><input checked="" type="checkbox"/> OBTAINED <input type="checkbox"/> INITIATED <input type="checkbox"/> NOT REQ'D  | 8. CONTRACT IS TO BE WRITTEN IN STERILE FORM U.S. GOVERNMENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO   |  |
| 47. INDIVIDUAL WILL WORK UNDER "CONTROLLED CONDITIONS" I.E., REGULAR OFFICE HOURS AWAY FROM SUBJECT'S HOME AND PERFORMED UNDER THE SUPERVISION OF A STAFF EMPLOYEE OR STAFF AGENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO            | 10. PROPOSED CATEGORY (Contract agent, contract employee, etc.)<br>Staff Agent   |  |  |
| SECTION II PERSONAL DATA   |  |  |  |
| 11. CITIZENSHIP<br>U.S.  | 12. IF NOT U.S. CITIZEN, INDIVIDUAL IS A PERMANENT RESIDENT ALIEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  | 13. AGE<br>40  | 14. DATE OF BIRTH (Month, day, year)<br>October 4, 1915  |
| 16. LEGAL RESIDENCE (City and state or country)<br>Washington, D. C.   |  | 18. CURRENT RESIDENCE (City and state or country)  |  |
| 17. MARITAL STATUS (Check as appropriate)<br><input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED |  |  |  |
| 18. NUMBER OF DEPENDENTS (Not including individual) RELATIONSHIP AND AGE:<br>Wife, 47<br>Daughters, 15, 13, & 9<br>Sons, 13 & 11   |  | 19. INDIVIDUAL IS RELATED TO A STAFF EMPLOYEE, STAFF AGENT OR AN INDIVIDUAL CURRENTLY WORKING FOR THE AGENCY IN SOME CAPACITY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO RELATIONSHIP |  |
| SECTION III U.S. MILITARY STATUS   |  |  |  |
| 20. RESERVE  | 21. VETERAN<br>Yes   | 22. IF RETIRED, INDICATE CATEGORY (Longevity, combat disability, service disability non-combat)  |  |
| 23. BRANCH OF SERVICE<br>Army  | 24. RANK OR GRADE<br>1st Lt.   | 25. DRAFT ELIGIBLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO   | 26. DRAFT DEFERMENT OBTAINED BY CIA <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                    |
| SECTION IV COMPENSATION  |  |  |  |
| 27. BASIC SALARY<br>\$20,245<br>GS-15 Step 3   | 28. POST DIFFERENTIAL<br>15%   | 29. COVER (Breakdown, if any)<br>See below under #40   | 30. FEDERAL TAX WITHHOLDING  |
|  |  | COVER      CIA   |  |
|  |  | <input checked="" type="checkbox"/> YES <input type="checkbox"/> YES   |  |
|  |  | <input checked="" type="checkbox"/> NO <input type="checkbox"/> NO   |  |
| SECTION V ALLOWANCES (NORMALLY GRANTED ONLY TO RESIDENTS OF THE UNITED STATES)   |  |  |  |
| 31. QUARTERS   | 32. POST<br>N. A.  | 33. OTHER<br>N. A.   |  |
| 34. COVER (Breakdown, if any)<br>* Quarters handled locally  |  |  |  |
| SECTION VI TRAVEL  |  |  |  |
| 34. TYPES<br><input checked="" type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> DOMESTIC OPERATIONAL <input type="checkbox"/> FOREIGN OPERATIONAL   |  |  | 35. WITH DEPENDENTS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                                    |
| 37. HOME TO BE SHIPPED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO   | 38. HOME TO BE STORED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  | 39. PERSONAL VEHICLE TO BE SHIPPED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO   | 39. PERSONAL VEHICLE TO BE USED FOR OPERATIONAL TRAVEL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| 40. IF WITH DEPENDENTS STATE RELATIONSHIP, CITIZENSHIP, AGE AND DATE OF BIRTH.<br>Same as 18 above<br>For #29:   |  |  |  |
| SECTION VII OPERATIONAL EXPENSES   |  |  |  |
| 41. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input checked="" type="checkbox"/> CIA REGULATIONS <input type="checkbox"/> COVER POLICIES AND PROCEDURES  | 42. PURCHASE OF INFORMATION  |  |  |
|  | 43. ENTERTAINMENT  | 44. OTHER  |  |
|  | Yes  |  |  |
| 45. PAYMENT AND ACCOUNTABILITY WILL BE IN CONFORMANCE WITH <input type="checkbox"/> CIA REGULATIONS <input checked="" type="checkbox"/> COVER POLICIES AND PROCEDURES  |  |  |  |

|   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
|---|--|---|--|---------------------------------------|--------------|----------------------|-----------------------|--------------------------------|----------------------------|------|--------------------------------|----------|---|---|--|--|---|--------|
| <b>CONTRACT INFORMATION AND CHECK LIST<br/>(CONTINUED)</b>  |  | SEE DIVISION<br>[ ]   | DIVISION<br>[ ]  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| WITH SEE INSTRUCTIONS ON REVERSE SHEET.   |  | TELEPHONE TELEVISION<br>[ ]   | DATE<br>28 September 1964  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION VIII<br>COVERED BENEFITS  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 86. BENEFITS (See HR 10-44, HR 10-41, HR 10-7, HR 10-33, and HR 10-610-1, HR 10-1000-1 and/or successor regulations for benefits applicable to various categories of contract personnel.)   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| Same as Staff Employee  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION IX<br>COVERED ACTIVITY  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 87. STATUS (Check)  | PROPOSED<br><input checked="" type="checkbox"/> ESTABLISHED  | 88. TYPE (Check)  | <input checked="" type="checkbox"/> PROFESSIONAL<br><input type="checkbox"/> FULL-TIME<br><input type="checkbox"/> EDUCATIONAL<br><input type="checkbox"/> COMMERCIAL<br><input type="checkbox"/> MILITARY<br><input type="checkbox"/> TOURIST<br><input type="checkbox"/> OTHER |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 89. IF COVER PAYMENTS ARE CONTEMPLATED, THEY WILL BE EFFECTED ON REIMBURSABLE BASIS<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION X<br>OFFSET OF INCOME   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 90. OFFSET OF INCOME AND OTHER EMOLUMENTS DERIVED FROM COVER ACTIVITIES (If less than total, justify in separate memo attached hereto.)<br><input checked="" type="checkbox"/> TOTAL <input type="checkbox"/> PARTIAL <input type="checkbox"/> NONE   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XI<br>TERM  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 91. DURATION  | 92. EFFECTIVE DATE   | 93. RENEWABLE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| DAYS    MONTHS    YEARS<br>2            2   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 94. TERMINATION NOTICE (Number of days)<br>30   | 95. FORFEITURE OF RETURN TRAVEL FOR RESIGNATION PRIOR TO CONTRACT TERMINATION<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XII<br>FUNCTION   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 96. PRIMARY FUNCTION (CI, FI, PP, other)<br>FI  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XIII<br>DUTIES  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 97. LIST OF DUTIES TO BE PERFORMED<br>[ ]   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XIV<br>QUALIFICATIONS   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 98. EXPERIENCE<br>Subject has been employed by the Agency since 28 September 1952   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XV<br>EMPLOYMENT PRIOR TO CIA   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 99. EDUCATION<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="2" style="width:15%;">(Check Highest Level Attained)</td> <td>GRADE SCHOOL</td> <td>HIGH SCHOOL GRADUATE</td> <td>TRADE SCHOOL GRADUATE</td> </tr> <tr> <td>BUSINESS SCHOOL GRADUATE</td> <td>COMMERCIAL SCHOOL GRADUATE</td> <td></td> </tr> <tr> <td colspan="4">COLLEGE (No degree)</td> </tr> </table>                           |  |   |  | (Check Highest Level Attained)        | GRADE SCHOOL | HIGH SCHOOL GRADUATE | TRADE SCHOOL GRADUATE | BUSINESS SCHOOL GRADUATE       | COMMERCIAL SCHOOL GRADUATE |      | COLLEGE (No degree)            |          |   |   |  |  |   |        |
| (Check Highest Level Attained)  | GRADE SCHOOL   | HIGH SCHOOL GRADUATE  | TRADE SCHOOL GRADUATE  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
|   | BUSINESS SCHOOL GRADUATE   | COMMERCIAL SCHOOL GRADUATE  |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| COLLEGE (No degree)   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 100. LANGUAGE COMPETENCY<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="2" style="width:15%;">(Check Appropriate Degree Competency)</td> <td>LANGUAGE</td> <td>SPEAK</td> <td>WRITE</td> <td>READ</td> <td>UNDERSTAND</td> <td>HEAR</td> <td>INDIVIDUAL'S COUNTRY OF ORIGIN</td> </tr> <tr> <td>Japanese</td> <td>X</td> <td>X</td> <td></td> <td></td> <td>X</td> <td>U.S.A.</td> </tr> </table> |  |   |  | (Check Appropriate Degree Competency) | LANGUAGE     | SPEAK                | WRITE                 | READ                           | UNDERSTAND                 | HEAR | INDIVIDUAL'S COUNTRY OF ORIGIN | Japanese | X | X |  |  | X | U.S.A. |
| (Check Appropriate Degree Competency)   | LANGUAGE   | SPEAK   | WRITE  |                                       | READ         | UNDERSTAND           | HEAR                  | INDIVIDUAL'S COUNTRY OF ORIGIN |                            |      |                                |          |   |   |  |  |   |        |
|   | Japanese   | X   | X  |                                       |              | X                    | U.S.A.                |                                |                            |      |                                |          |   |   |  |  |   |        |
| 101. AREA KNOWLEDGE<br>Japan  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 102. GIVE INCLUSIVE DATES, POSITION, TITLE OR TYPE EMP., SALARY AND REASON FOR LEAVING.<br>1941-42 - Univ. of Calif.<br>1942-46 - U.S. Navy<br>1946-52 - War Dept. Intel Specialist   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| SECTION XVI<br>ADDITIONAL INFORMATION   |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| 103. ADDITIONAL OR UNUSUAL REQUIREMENTS, JUSTIFICATIONS OR EXPLANATIONS (Use other side if necessary)<br>[ ]  |  |   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
| DATE  | SIGNATURE  | TITLE   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |
|   | [ ]  | [ ]   |  |                                       |              |                      |                       |                                |                            |      |                                |          |   |   |  |  |   |        |

SECRET

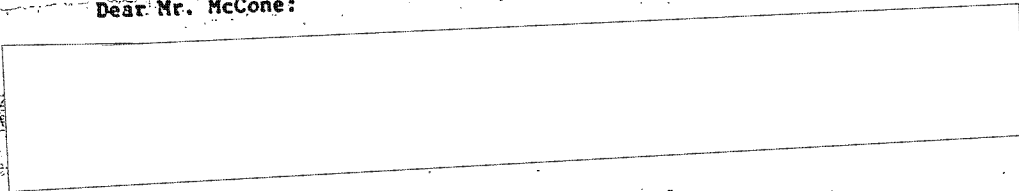
This document consists of 1 page,  
No. 1 of 3 copies, Series A.

DEPARTMENT OF STATE  
THE DIRECTOR OF INTELLIGENCE AND RESEARCH

Executive Registry  
60-5841  
CD:P J-1105

AUG 21 1964

Dear Mr. McCone:



Sincerely,

*George Denney*  
George C. Denney Jr.  
Acting

Attachment:  
Telegram 586, copy 2.

Mr. John A. McCone  
Director,  
Central Intelligence Agency,  
Langley, Virginia

SECRET

17

INCOMING TELEGRAM *Department of State*

34-31

Action

CONTROL: 13542  
RECD: AUGUST 17, 1964  
6:19 A.M.

SECRET

INRD

FROM: [REDACTED]

Info

ACTION: SECSTATE 526

RMR

DATE: AUGUST 17, 2 P.M.

ROGER CHANNEL

002

PERSONAL FOR MCCONE [REDACTED]

WE WILL BE REPORTING IN ANOTHER FORM OUR ANALYSIS OF THE CASE [REDACTED] I JUST WANT TO TELL YOU, HOWEVER, THAT WE WOULD NOT RPT NOT HAVE BEEN ABLE TO GET THE RESULTS WE DID IF IT HAD NOT BEEN FOR [REDACTED] HE WAS ON THE JOB WITHIN MINUTES AFTER THE MEN WALKED IN, GOT HIS RUSSIAN SPEAKING PEOPLE WORKING QUICKLY, AND HELPED TO HANDLE THE WHOLE AFFAIR WITH EFFICIENCY AND DISPATCH. HIS EXPERIENCE [REDACTED] AND THE CONFIDENCE WHICH THE [REDACTED] AUTHORITIES SHOWED IN WORKING WITH HIM WERE A DECISIVE FACTOR IN THE DEFINITE CHANGE WHICH TOOK PLACE OVER THE WEEKEND IN THE [REDACTED] ATTITUDE ON HOW TO HANDLE CASES LIKE THIS.

HIS CONTRIBUTION HAS BEEN MAJOR AND THE RESULTS WILL BE LONG-LIVED. THIS IS ONLY ANOTHER EXAMPLE OF THE SERVICE [REDACTED] HAS PERFORMED HERE OVER THE YEARS. WE ARE SORRY TO SEE HIM LEAVE AND WILL MISS HIM VERY MUCH.

GP-1.

BA [REDACTED]

SECRET

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SECRET

Supplement to Staff Employee Personnel  
Action for Integration of

Effective 8 May 1952

The purpose of this memorandum is to call your attention to existing policies which are particularly material to you while you are integrated and to set forth certain rights and obligations which are incident to your status as an appointed employee. It is hereby agreed and understood that:

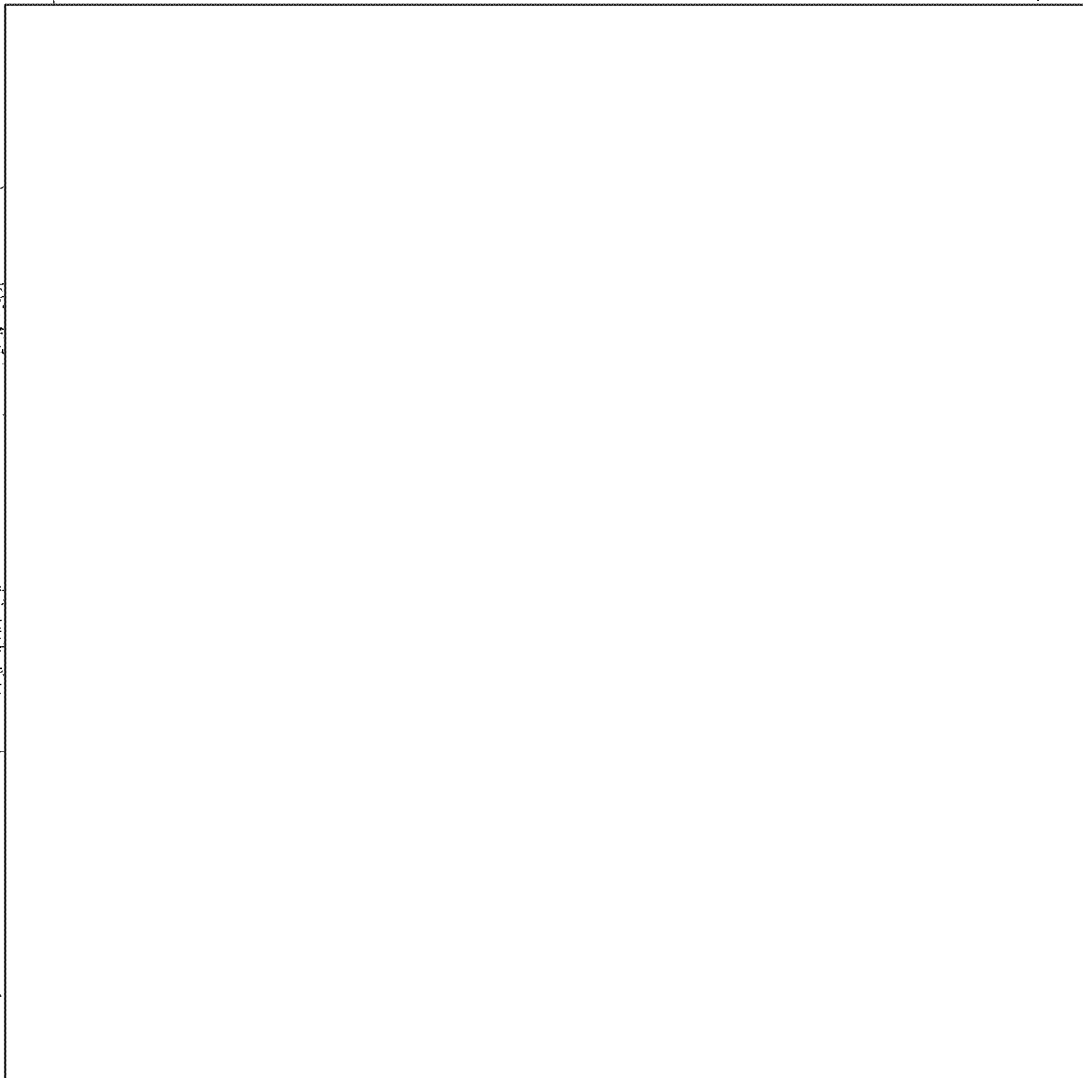
1. As an employee of this organization, at the present grade and salary of GS-15 \$12,770 per annum,

2. It is understood and agreed that the minimum period of your overseas tour of duty is governed by and coincident with the prescribed tour of duty of your cover organization. Currently, your prescribed tour consists of a period of 24 Months from the date of your arrival at your overseas post of duty. Your assignment may be terminated earlier for the convenience of this organization and the length of your tour of duty, as currently specified, may be unilaterally changed by this organization in order to conform with subsequent changes in the prescribed tour of your cover facility. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed the minimum period of service prescribed above from the date of arrival at your overseas post of duty, you will not be entitled to return travel or transportation for yourself or your dependents to the United States at Government expense. If you request termination of your overseas assignment solely for your own convenience, unless it is for circumstances that are considered by this organization to be beyond your control or if you are terminated for cause under the regulations of this organization before you have completed one (1) year of service from the date of your arrival at your overseas post of duty, you will be required to reimburse the Government for all of its expenses for your travel and transportation, and that of your dependents, from the continental United States to such overseas post of duty.

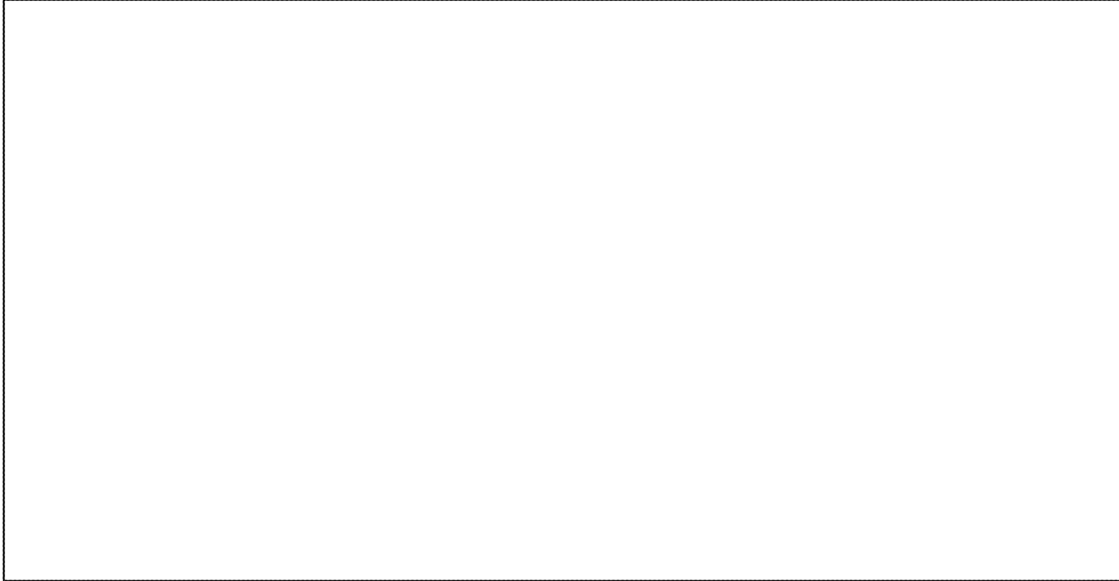


SECRET

3. Travel to your post of duty overseas and your return travel to the United States, as well as travel performed overseas which is consis-



SECRET



6. You will be required to keep forever secret this agreement and all other information which you may obtain by reason hereof, unless you are released in writing by this organization from this obligation. Violation of such secrecy may subject you to criminal prosecution under the Espionage Laws, dated 25 June 1948, as amended, and other applicable laws and regulations. The termination of your employment with this organization will not release you from the obligation of any security oath you may be required to take.

UNITED STATES GOVERNMENT

BY



Personnel Office

ACCEPTED:

*Robert P. ...*

SECRET

13 5 OCT 1958

MEMORANDUM FOR: Chief, Far East Division

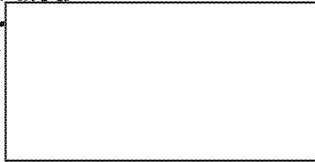
SUBJECT: Report of Gifts

REFERENCE: Memo for D/Pers from C/PB dtd 25 Sept 58,  
Subject: Gifts to Agency Personnel

Referenced memorandum reports the receipt of gifts by several Agency employees from recent visitors. These gifts are determined to be of insignificant intrinsic value and may be retained by the recipients for whatever use they desire.

Gordon H. Sizant  
Director of Personnel

Distribution:

- 0 & 1 - Addressee
- 1 - EA O-33/P
- 1 - Recorder, MAB
- 1 - V/Sec
- 1 - D/Pers Subject File
- 1 - D/Pers Reader Chrono
- 1 - 

CD/Pers/BI Division (10 Oct 58)

SECRET

CONFIDENTIAL

4-2108

MEMORANDUM FOR: Director of Personnel

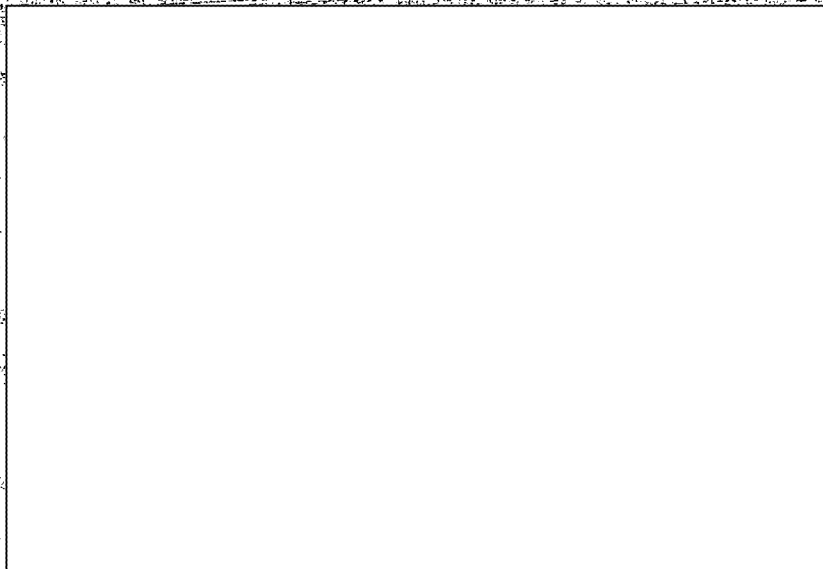
VIA: Director of Security  
Attn: Chief, Policy Staff

SUBJECT: Gifts to Agency Personnel

REFERENCE: Field Regulation 20-644

The following Agency personnel received gifts as noted from three Cabinet Research Chamber visitors during their recent visit to Washington:

Approx. value



Signed Robert P. Fitzgerald  
ROBERT FITZGERALD  
Chief, Far East Division

CONFIDENTIAL

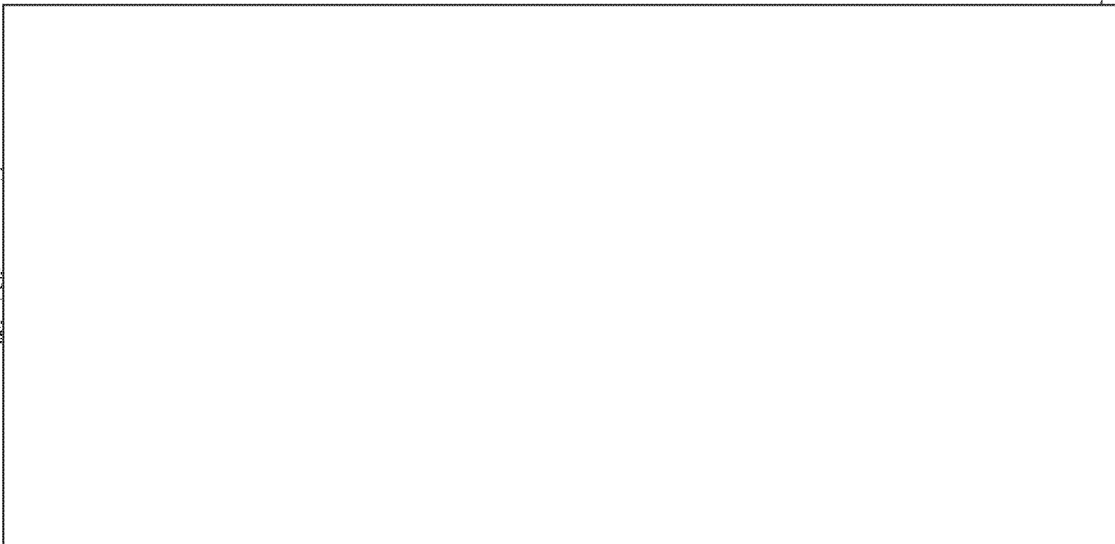
SECRET

31 OCT 1957

MEMORANDUM FOR: Chief, Far East Division

SUBJECT: Gifts from Foreign National

REFERENCE: Memo to D/Pers from C/FE dated 22 Oct 57, subject: Gifts to Agency Personnel (DD/P 3-508)



2. Under the provisions of Regulation 20-612, dated 10 October 1954, it is my determination that these gifts are of such insignificant intrinsic value that they may be retained and utilized to whatever benefit desired.

Courtney H. Stewart  
Director of Personnel

Distribution:

- 1 - Adm/Personnel
  - 1 - DD/P
  - 1 - D/Sec w/Asst
  - 1 - D/Asst w/Asst
  - 1 - Tech Individual's File w/Asst
  - 1 - CP File: Foreign Affairs and Decorations
  - 1 - D/Personnel Review Chron
- CC/Person/Asst (30 Oct 57)

SECRET

SECRET

7 2 1951

MEMORANDUM FOR: Director of Personnel  
VIA: Director of Security  
ATTN: Chief, Policy Staff  
SUBJECT: Gifts to Agency Personnel  
REFERENCE: Field Regulation 20-644



2. Additional gifts of small pictures were left by FOWI to be given to those people whom he did not meet but who worked behind the scenes to make his visit a pleasant one. No listing is believed necessary of these names or their recipients.

ALFRED G. DIMES, Jr.  
Chief, Far East Division

Distribution:

- 2 - Director of Personnel
- 1 - Director of Security

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE

|  |  |                           |   |
|--|--|---------------------------|---|
| DO NOT COMPLETE  |  | FOR HEADQUARTERS USE ONLY |   |
| DO NOT COMPLETE  | AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:   |                           | DATE (From item #2)                                       |
|  | DATE (From item #1)  | NAME                      | 9 Nov 1955  |
| DO NOT COMPLETE  | NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW: |                           | DATE  |
|  | [Redacted] Chief, FE/1   |                           | 19 Dec 1955   |
| TO BE COMPLETED BY EMPLOYEE  |  |                           |   |
| 1. DATE OF BIRTH   | 2. GRADE   | 3. CURRENT POSITION TITLE |   |
| [Redacted]   | GS-14  | Chief, Liaison            |   |
| 4. SERVICE DESIGNATION (if known)  | 5. CURRENT STATION OR FIELD BASE   |                           | 6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR |
| DI   | Japan Base   |                           | ETA - 18 Sept 56  |
| 7. EXPECTED DATE OF DEPARTURE  |  |                           | 1 June 1956   |
| 8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):  |  |                           |   |
| <p>Formerly Deputy Chief of Mission; formerly Deputy Chief of Mission, KUTUBE and Chief, Mission Liaison; currently, Chief, Liaison, [Redacted] Current assignment involves responsibility for all Base Liaison activities with all [Redacted] agencies and Department of Defense agencies represented [Redacted] Current assignment also involves case officer responsibilities for two KUTUBE operations and one developmental KUTUBE operation.</p> |  |                           |   |
| 9. PREFERENCE FOR NEXT ASSIGNMENT:   |  |                           |   |
| A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.  |  |                           |   |
|  |  |                           |   |
| B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):   |  |                           |   |
| <ol style="list-style-type: none"> <li>Advanced CE course</li> <li>Operational Security course</li> </ol>  |  |                           |   |

22 Dec 55

SECRET

9. PREFERENCE FOR NEXT ASSIGNMENT (continued)

C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:

1 RETURN TO MY CURRENT STATION       2 BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY

3 BE ASSIGNED TO ANOTHER FIELD STATION

WITH RESPECT TO A POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE YOUR 1ST, 2ND AND 3RD CHOICE FOR GEOGRAPHIC AREA OR SPECIFIC STATION:      See attachment:

1ST CHOICE: \_\_\_\_\_

2ND CHOICE: \_\_\_\_\_

3RD CHOICE: \_\_\_\_\_

---

10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS?      INDICATE NUMBER OF WORK DAYS \_\_\_\_\_

---

11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:

7 dependents:      Wife - 37      Daughter and son - 5  
                                  Daughter - 12      Son - 3  
                                  Daughter - 7      Daughter - 1

---

12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM.

TO BE COMPLETED BY SUPERVISOR AT FIELD STATION

---

13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

TO BE COMPLETED BY APPROPRIATE SUPERVISOR AT HEADQUARTERS

---

14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.

TO BE COMPLETED BY APPROPRIATE SUPERVISOR AT HEADQUARTERS

15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE DIVISION TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:

Despite subject's lack of formal headquarters assignment we feel for overriding operational reasons he should be returned to the field for another tour.

---

|  |                  |
|--|------------------|
| 16. NAME OF SUPERV <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span> | SIGNATURE: _____ |
| TITLE:      Chief, FE/1  | DATE: _____      |

---

17. REMARKS (additional comment)



ATTACHMENT TO FIELD REASSIGNMENT QUESTIONNAIRE:

Re Paragraph C - Preference for Next Assignment:

1. I would like to state that while a tour at Headquarters should be my preference I believe that for me to leave my current assignment at this time for even one year would not be in the best interests of either KUMARK or ODYOKO. Therefore, I request home leave, with approximately one month at Headquarters for requested training and refresher work and one month of leave, returning to current assignment for at least an additional two-year tour with the proviso that after the first year the situation be re-examined with the ultimate view of possibly at that point considering a two-year tour at Headquarters.

2. [REDACTED]

[REDACTED] I feel that I have been able to provide a certain degree of intelligence continuity which could be spoiled by a two-year break. Realizing that career-wise I should spend at least one tour at Headquarters in the future, I believe that, despite possible reflections against my career, that two year period should be delayed until

[REDACTED]

3. I believe that by experience, training and inclination I can better serve KUMARK in this country in the type of work in which I am now engaged than by any other assignment currently known to me.

S-E-C-R-E-T

Combined Personnel Action in lieu of SF-52.

Change of Service Designation from D to DI.

Effective date: 19 June 1955

GRADE

Office of DDP

[Redacted]

15

CI

[Redacted]

14  
13  
13  
13

EE

[Redacted]

13  
13

FE

[Redacted]

13  
13  
14

MEA

[Redacted]

15  
13

VE

[Redacted]

14  
13  
14  
13

RECORDED  
APR 6/15/55

[Redacted]

10 June 1955

S-E-C-R-E-T

CONFIDENTIAL

NARRATIVE EVALUATION REPORT

Name: [redacted]

GS-14

Period Covered: 1 June 1953 to 1 June 1954

Occasion for report: Annual X; reassignment of reporting officer \_\_\_\_\_; proposed reassignment of employee reported on \_\_\_\_\_; covering initial 90 days of employment \_\_\_\_\_.

Employee is to be rated upon following factors:

1. Knowledge of the job being performed.
2. Judgment in arriving at logical and workable solutions.
3. Dependability, not only in being on the job, but in accomplishment of assigned tasks within reasonable deadlines.
4. Stability under pressure and ability to adjust to changing conditions and circumstances.
5. Imagination, initiative, and originality.
6. Security consciousness.
7. Tact and diplomacy in dealing with others.

IN FAIRNESS TO EMPLOYEES, COMPLETED NARRATIVE EVALUATIONS  
SHOULD BE DISCUSSED WITH EMPLOYEE CONCERNED

1. Employee is well qualified in substantive fields [redacted] This knowledge serves him exceedingly well in the performance of assigned duties. What knowledge he lacks concerning KUBARK policies or procedures is fast being supplied by practical field experience.
2. His judgment at arriving at logical solutions is good under normal conditions, and he generally comes up with solutions which are workable and realistic.
3. He is completely dependable and is particularly sensitive to deadlines, which he makes almost a fetish of meeting. In every sense of the word, he is a man of action in terms of treating with the recurring problems of the station.
4. Employee is somewhat excitable and emotional and, thus, at times of unusual pressure, he may require a steadying hand. This is not a serious fault and is one concerning which the employee is aware. He adjusts well to changing conditions and situations.
5. His imagination, initiative, and originality have shown time and again in his dealings with Army personalities [redacted] with whom he has maintained excellent relations on behalf of this station.

CONFIDENTIAL RYB/T

6. Security consciousness is excellent.
7. Tact and diplomacy in dealing with others is superior.

NOTE: See attached sheet for additional comments by Reviewing Officer

Date: 17 June 1954



(If Reviewing Officer or Chief of Station does not concur with this report, exceptions will be stated in space provided below)

CONFIDENTIAL

1. While the Reviewing Officer concurs generally with statements made in this report, it is felt that the over-all impression does not give Subject as much credit as he deserves. In the opinion of the Reviewing Officer, Subject's faults are somewhat over-emphasized. Subject's qualities as exhibited during past months have proven to be outstanding, particularly in his excellent judgement in arriving at logical and workable solutions and in his stability under operational exigencies in which Subject has performed exceedingly well under heavy pressures of both time and responsibility.
2. Working in an area where, in the past, there has been an unfortunate number of misunderstandings between KUFEBE and KUCGAN components, and where there have been the usual difficult personality conflicts, Subject has exhibited not only superior tact and diplomacy, but has also been able to smooth out many difficulties, and modify aggressively offensive actions. He has supplied a needed cooperative spirit and sense of humor to prevent, in many cases, serious antagonisms and unnecessary vituperation so detrimental to a smooth working organization. Subject's contribution to bringing about a friendly, cooperative relationship within the mission and with outside agencies including U.S. military organizations cannot be praised too highly.

VIA: Air  
SPECIFY AIR OR SEA POUCH

DISPATCH NO. [ ] 1279

**SECRET**  
Security Information  
CLASSIFICATION

TO : Chief, FE  
Through: [ ]  
FROM : [ ]

DATE: 17 AUG 1953

SUBJECT: GENERAL Administrative - Personnel  
SPECIFIC: [ ] Commendation of

1. The purpose of this dispatch is to make a [ ] his excellence of performance of duties demonstrated by [ ] over the period of his first ten months of assignment to [ ]
2. During that time [ ] has shown himself to be a valuable addition to KUBARK as a whole and a great asset to this particular station. As [ ] Chief of Staff, he has performed innumerable tasks in the operational, intelligence and support fields with effectiveness and dispatch. His aggressiveness, imagination and initiative in spite of recurring frustration have been an inspiration to all members of [ ] His diligence and selflessness have set an example throughout the ranks. From the first day of his arrival [ ] has dedicated his every effort to improving the efficiency and broadening the capability of the station.
3. [ ] should be especially commended for his unceasing efforts in connection with the provision of new office space for this organization. Working tactfully but aggressively through the Army hierarchy [ ] he was able to accomplish many concessions of direct benefit to [ ] which would have been most difficult to obtain through official channels.
4. Special mention should also be made of the excellent progress [ ] has made in the fostering of truly cooperative [ ] relationships [ ] Capt- [ ] a large portion of common sense and patience. [ ] may be credited with the development of highly profitable [ ] relations with military organizations in the area.
5. [ ] has shown no task to be too large or too small to deserve his range of energy and talent. He has been a vital factor in the accomplishments of [ ] to date.

15 August 1953

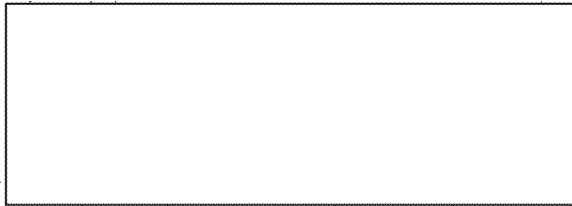
Distribution:  
3 - Headquarters  
1 - [ ]

**SECRET**  
Security Information  
CLASSIFICATION

[ ]

CERTIFICATE OF ATTENDANCE

I certify that on 06/14/52 I have attended  
the Agency Indoctrination Course specified by Regulation  
25-1.



### APPOINTMENT AFFIDAVITS

**IMPORTANT.**—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

I,  (Name)  
do solemnly swear (or affirm) that—  
(Place of employment)

**A. OATH OF OFFICE**

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, **SO HELP ME GOD.**

**B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION**

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

**C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT**

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

**D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE**

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

**E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE**

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

*22 September 1952*  
(Date of entrance on duty)

Subscribed and sworn before me this *22<sup>nd</sup>* day of *September*, A. D. 19*52*

*Richard M. ...*  
(Title)

**NOTE.**—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.



### DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

|    |                        |
|----|------------------------|
| 1. |                        |
| 2. |                        |
| 3. |                        |
| 4. | TELEPHONE NO.<br>55303 |

4. DURING THE PAST 24 MONTHS?  YES  NO  
If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

| NAME | POST OFFICE ADDRESS<br>(Give street number, if any) | (1) POSITION<br>(2) DEPARTMENT OR AGENCY IN WHICH EMPLOYED | (1) TEMPORARY OR NOT<br>(2) DEPARTMENT OR AGENCY IN WHICH EMPLOYED | RELATION-<br>SHIP | MAR-<br>RIED<br>(Check one) | SINGLE |
|------|---|--|--|-------------------|-----------------------------|--------|
|      |   | 1. _____   |  |                   |                             |        |
|      |   | 2. _____   |  |                   |                             |        |
|      |   | 1. _____   |  |                   |                             |        |
|      |   | 2. _____   |  |                   |                             |        |
|      |   | 1. _____   |  |                   |                             |        |
|      |   | 2. _____   |  |                   |                             |        |

| INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN  | YES | NO | ITEM NO. | 10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS.<br>WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY |
|--|-----|----|----------|---|
| 5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?   | X   |    |          |   |
| 6. ARE YOU AN OFFICER OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?<br><i>If your answer is "Yes", give details in Item 10.</i>  |     | X  |          |   |
| 7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?<br><i>If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay; and under what retirement act; and rating, if retired from military or naval service.</i>                        |     | X  |          |   |
| 8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN DISCHARGED, OR FINED OR REPRIMANDED, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY EMPLOYER?<br><i>If your answer is "Yes", give in Item 10 the name and address of employer, date and reason in each case.</i>   |     | X  |          |   |
| 9. HAVE YOU EVER BEEN ARRESTED (NOT INCLUDING TRAFFIC VIOLATIONS FOR WHICH YOU WERE FINED 25 OR LESS, OR SUSPENDED COLLATERAL OF MAJOR LESS) SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT?<br><i>If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed; if any; or other disposition of the case. If appointed, your fingerprints will be taken.</i> |     | X  |          |   |

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and Acts of Congress pertaining to appointments.

This form should be checked for nothing of office, pecuniary, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee.*—It is the duty of the appointing officer to guard against impersonation and to determine beyond reasonable doubt that the appointee is the same person whose appointment was authorized. The appointee's signature and handwriting are to be compared with the application and other pertinent papers. If the appointee qualifies as a witness on oath, the signature on this form should be compared with the signature on the declaration sheet, which was signed in the conventional manner. His physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that appointee is not outside the age range for appointment. If no such determination is made, the appointment may not be consummated.

(3) *Citizenship.*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) applicable Acts. Item 5 of certificate an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointing officer should be consulted and assurance has been secured from the existing files of the Civil Service Commission.

(4) *Members of Family.*—Section 3 of the Civil Service Act provides that whenever there are already two or more members of a family serving under permanent or permanent appointment in the competitive service, no other member of such family is eligible for provisional or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this restriction. The members of family previously listed are not subject to this restriction. Detailed instructions are referred to the appropriate rules of the Civil Service Commission for details.

Date 23 SEPTEMBER 1952

Name \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Dear \_\_\_\_\_:

1. This is to notify you that your employment has been accepted effective

28 SEPTEMBER 1952

Position: **I. O. GS-14**

Base Salary: **\$9600.00**

2. You will be:

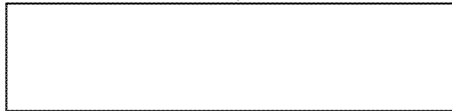
- a. Entitled to annual and sick leave (only in accordance with existing rules and regulations.)
- b. Reimbursed for travel expenses in accordance with this Agency's regulations or Standardized Government Travel Regulations, as amended.
- c. If stationed outside the Headquarters Area, granted such monetary allowances as are prescribed by regulations of this Agency.

3. As a condition of your employment by this Agency, you are subject to assignment to tours of duty at posts outside the Headquarters Area. Each time you are so assigned, unless otherwise specified in advance by this Agency, you will be required to remain at the post to which assigned for a period of 24 months from the date of arrival thereat, unless sooner transferred, reassigned or separated for reasons beyond your control. If you wish to return to the Headquarters Area for personal reasons during that period, all travel and transportation costs incident to such return will be borne by you, with no expense to the Government.

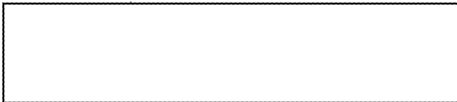
4. If this employment is for assignment to a post outside the Headquarters Area, it is understood and agreed that, unless earlier separated for reasons beyond your control, you will remain in Government service for 12 months after your arrival at your first post outside the Headquarters Area, and if you violate this agreement, any money expended by the United States on account of your travel and the transportation of your immediate family and household goods will be considered a debt due to the United States.

5. Employment is conditioned upon satisfactory completion of the training courses proscribed by this Agency and satisfactory performance of duty for a total period of six months from date of employment. In the event either training or performance of duty is deemed unsatisfactory by this Agency, you will be offered other types of employment if available, or your employment will be terminated.

6. Your appointment is for such time as your services may be required and funds are available for the work of this Agency. Notice of termination will be given you by procedure similar to that provided by existing rules and regulations.



I accept the above agreement as a condition of my employment by this Agency.



23 September 1952  
Date *igt*

SECRET

(When Filled In)

| MEDICAL ACTION REQUEST AND REPORT                             |  |  |
|---|--|--|
| I REQUEST FOR PHYSICAL EXAMINATION BY                         |  |  |
| 1. NAME (Last)  | (Initial)                                  | 2. DATE  |
| [Redacted]  |  | 20 November 1957   |
| 3. TO: [Redacted]   | 3. GRADE                                   |  |
| 4. TYPE OF POSITION   |  |  |
| <input type="checkbox"/> Departmental                         | <input type="checkbox"/> Pre-employment    |  |
| <input type="checkbox"/> U.S. Field                           | <input checked="" type="checkbox"/> Annual |  |
| <input type="checkbox"/> Overseas                             | <input type="checkbox"/> Special (Specify) |  |
| 5. EVALUATE FOR   |  |  |
| <input type="checkbox"/> EOP                                  | <input type="checkbox"/> Returned          |  |
| <input type="checkbox"/> Overseas                             | <input type="checkbox"/> Special (Specify) |  |
| <input type="checkbox"/> Returned                             |  |  |
| II REPORT OF MEDICAL EVALUATION                               |  |  |
| <input type="checkbox"/> Qualified for Full Duty (General)    |  | <input type="checkbox"/> Qualified for Full Duty (Special) |
| <input type="checkbox"/> Qualified for Departmental Duty Only |  | <input type="checkbox"/> Disqualified                      |
| Remarks:  |  |  |
| EXEMPT FOR CURRENT DUTY - 1957                                |  |  |
| [Redacted]  |  |  |
| MEDICAL OFFICE  |  |  |

SECRET

SECRET

(When Filled In)

| MEDICAL ACTION REQUEST AND REPORT  |  |  |
|--|--|--|
| I REQUEST FOR PHYSICAL EXAMINATION BY  |  |  |
| 1. NAME  | (Initial)                                  | 2. DATE  |
| [Redacted]   |  | 7 Sept. 1956   |
| 3. TO: [Redacted]  | 3. GRADE                                   |  |
| 4. TYPE OF POSITION  |  |  |
| <input type="checkbox"/> Departmental  | <input type="checkbox"/> Pre-employment    |  |
| <input type="checkbox"/> U.S. Field  | <input type="checkbox"/> Annual            |  |
| <input type="checkbox"/> Overseas  | <input type="checkbox"/> Special (Specify) |  |
| 5. EVALUATE FOR  |  |  |
| <input type="checkbox"/> EOP   | <input type="checkbox"/> Returned          |  |
| <input type="checkbox"/> Overseas  | <input type="checkbox"/> Special (Specify) |  |
| <input checked="" type="checkbox"/> Returned   |  |  |
| II REPORT OF MEDICAL EVALUATION  |  |  |
| <input type="checkbox"/> Qualified for Full Duty (General)                                 |  | <input type="checkbox"/> Qualified for Full Duty (Special) |
| <input type="checkbox"/> Qualified for Departmental Duty Only                              |  | <input type="checkbox"/> Disqualified                      |
| Remarks:   |  |  |
| Subject is qualified for Departmental Duties. (9/11/56)<br>to be re-examined upon request. |  |  |
| [Redacted]   |  |  |
| MEDICAL OFFICE   |  |  |

SECRET

| REPORT OF PHYSICAL QUALIFICATIONS  |                   |                               |
|--|-------------------|-------------------------------|
| NAME   |                   | DATE 1/5/53                   |
| FOR VOUCHERED EMPLOYEE ONLY  |                   |                               |
| NATURE OF ACTION   | TITLE OF POSITION |                               |
| GRADE  | DEPT.             | FIELD                         |
| SUBJECT FOUND <input type="checkbox"/> FIT <input type="checkbox"/> UNFIT FOR DUTY IN THE ABOVE GRADE AND POSITION.  |                   |                               |
| FOR UNVOUCHERED EMPLOYEE ONLY  |                   |                               |
| SUBJECT QUALIFIED FOR:   |                   |                               |
| <input type="checkbox"/> FULL DUTY OVERSEAS <input checked="" type="checkbox"/> LIMITED DUTY OVERSEAS <input type="checkbox"/> DUTY IN USA ONLY                                      |                   |                               |
| PROFILE SERIAL (MILITARY ONLY) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                   |                               |
| DEFECTS NOTED AND/OR RECOMMENDATIONS:  |                   |                               |
| NON-ARDUOUS O/S DUTIES.  |                   |                               |
|  |                   | PHYSICAL REQUIREMENTS OFFICER |

FORM NO. 37-92 REPLACES PREVIOUS EDITIONS OF FORMS 37-38 AND 37-37, WHICH MAY BE USED.

(28)

| REPORT OF PHYSICAL QUALIFICATIONS  |                   |                                 |
|--|-------------------|---------------------------------|
| NAME   |                   | DATE <del>XXXXXX</del> 12/24/52 |
| FOR VOUCHERED EMPLOYEE ONLY  |                   |                                 |
| NATURE OF ACTION   | TITLE OF POSITION |                                 |
| GRADE  | DEPT.             | FIELD                           |
| SUBJECT FOUND <input type="checkbox"/> FIT <input type="checkbox"/> UNFIT FOR DUTY IN THE ABOVE GRADE AND POSITION.  |                   |                                 |
| FOR UNVOUCHERED EMPLOYEE ONLY  |                   |                                 |
| SUBJECT QUALIFIED FOR:   |                   |                                 |
| <input type="checkbox"/> FULL DUTY OVERSEAS <input type="checkbox"/> LIMITED DUTY OVERSEAS <input type="checkbox"/> DUTY IN USA ONLY   |                   |                                 |
| PROFILE SERIAL (MILITARY ONLY) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                   |                                 |
| DEFECTS NOTED AND/OR RECOMMENDATIONS:  |                   |                                 |
| Returnee examination O.K.  |                   |                                 |
|  |                   | PHYSICAL REQUIREMENTS OFFICER   |

FORM NO. 37-32 REPLACES PREVIOUS EDITIONS OF FORMS 37-38 AND 37-37, WHICH MAY BE USED.

(28)

SECRET  
(When Filled In)

086

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

EMP [ ] SS D GRADE GS-17

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED ADDRESS (City, State, Country) YEARS ATTENDED (From-To) GRADUATE [ ] YES [ ] NO

COLLEGE OR UNIVERSITY STUDY

Table with columns: NAME AND LOCATION OF COLLEGE OR UNIVERSITY, SUBJECT (MAJOR, MINOR), YEARS ATTENDED (FROM-TO), DEGREE RECEIVED, YEAR RECEIVED, NO. SEM/QUA. HRS. (Specify)

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

Table with columns: NAME AND ADDRESS OF SCHOOL, STUDY OR SPECIALIZATION, FROM, TO, NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

Table with columns: NAME AND ADDRESS OF SCHOOL, STUDY OR SPECIALIZATION, FROM, TO, NO. OF MONTHS

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: 2. NAME OF SPOUSE (Last) (First) (Middle) ( maiden) 3. DATE OF BIRTH 4. PLACE OF BIRTH (City, State, Country) 5. OCCUPATION 6. PRESENT EMPLOYER 7. CITIZENSHIP 8. FORMER CITIZENSHIP(S) COUNTRY(IES) 9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

Table with columns: NAME, RELATIONSHIP, DATE AND PLACE OF BIRTH, CITIZENSHIP, PERMANENT ADDRESS. Includes checkboxes for ADD and DELETE.

**SECRET**  
(When Filled In)

| SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL  |                               |  |                       |   |        |                    |                 |
|---|-------------------------------|--|-----------------------|---|--------|--------------------|-----------------|
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE | DATES OF TRAVEL OR RESIDENCE   | DATE & PLACE OF STUDY | KNOWLEDGE ACQUIRED BY - CHECK (X)   |        |                    |                 |
|   |                               |  |                       | RESIDENCE   | TRAVEL | STUDY              | WORK ASSIGNMENT |
|   |                               | APR 10 - 3-24-55   | 72                    |   |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| SECTION VI TYPING AND STENOGRAPHIC SKILLS   |                               |  |                       |   |        |                    |                 |
| 1. TYPING (PPM)   |                               | 2. SHORTHAND (PPM)   |                       | 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM  |        |                    |                 |
|   |                               |  |                       | <input type="checkbox"/> Gregg <input type="checkbox"/> Speedwriting <input type="checkbox"/> Stenotype <input type="checkbox"/> Other Specify: |        |                    |                 |
| SECTION VII SPECIAL QUALIFICATIONS  |                               |  |                       |   |        |                    |                 |
| PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.   |                               |  |                       |   |        |                    |                 |
| SECTION VIII MILITARY SERVICE   |                               |  |                       |   |        |                    |                 |
| CURRENT DRAFT STATUS  |                               |  |                       |   |        |                    |                 |
| 1. HAD YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?   |                               |  |                       | 2. NEW CLASSIFICATION   |        |                    |                 |
| <input type="checkbox"/> YES <input type="checkbox"/> NO  |                               |  |                       |   |        |                    |                 |
| 3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS   |                               |  |                       | 4. IF DEFERRED, GIVE REASON   |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| MILITARY RESERVE, NATIONAL GUARD STATUS   |                               |  |                       |   |        |                    |                 |
| CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG   |                               | <input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD |                       | <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD                                    |        |                    |                 |
| 1. CURRENT RANK, GRADE OR RATE  |                               | 2. DATE OF APPOINTMENT IN CURRENT RANK   |                       | 3. EXPIRATION DATE OF CURRENT OBLIGATION  |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| 4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active) <input type="checkbox"/> STANDBY (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED |                               |  |                       |   |        |                    |                 |
| 5. MILITARY MOBILIZATION ASSIGNMENT   |                               |  |                       | 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED   |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)  |                               |  |                       |   |        |                    |                 |
| NAME AND ADDRESS OF SCHOOL  |                               | STUDY OR SPECIALIZATION  |                       | DATE COMPLETED  |        | RESIDENT           |                 |
|   |                               |  |                       |   |        | AGENCY SPONSORED   |                 |
|   |                               |  |                       |   |        |                    |                 |
| SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS   |                               |  |                       |   |        |                    |                 |
| NAME AND CHAPTER  |                               | ADDRESS (Number, Street, City, State, Country)   |                       |   |        | DATE OF MEMBERSHIP |                 |
|   |                               |  |                       |   |        | FROM    TO         |                 |
|   |                               |  |                       |   |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| SECTION X REMARKS   |                               |  |                       |   |        |                    |                 |
|   |                               |  |                       |   |        |                    |                 |
| DATE  |                               | SIGNATURE OF EMPLOYEE  |                       |   |        |                    |                 |
| 7 APR 1955  |                               |  |                       |   |        |                    |                 |

**SECRET**

**SECRET**  
(When Filled In)

**QUALIFICATIONS UPDATE**

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*Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.*

**SECTION I BIOGRAPHIC AND POSITION DATA**

EMPLOYEE NUMBER: [ ] SSN: **D**

**SECTION II EDUCATION HIGH SCHOOL**

LAST HIGH SCHOOL ATTENDED: [ ] ADDRESS (City, State, Country): [ ] YEARS ATTENDED (From-To): [ ] GRADUATE:  YES  NO

**COLLEGE OR UNIVERSITY STUDY**

| NAME AND LOCATION OF COLLEGE OR UNIVERSITY | SUBJECT |       | YEARS ATTENDED FROM-TO | DEGREE RECEIVED | YEAR RECEIVED | NO. SEM/CRS. HRS. (Specify) |
|--|---------|-------|------------------------|-----------------|---------------|-----------------------------|
|  | MAJOR   | MINOR |                        |                 |               |                             |
| 1. [ ]                                     | [ ]     | [ ]   | [ ]                    | [ ]             | [ ]           | [ ]                         |
| 2. [ ]                                     | [ ]     | [ ]   | [ ]                    | [ ]             | [ ]           | [ ]                         |

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

**TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS**

| NAME AND ADDRESS OF SCHOOL | STUDY OR SPECIALIZATION | FROM | TO  | NO. OF MONTHS |
|----------------------------|-------------------------|------|-----|---------------|
| [ ]                        | [ ]                     | [ ]  | [ ] | [ ]           |

**OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE**

| NAME AND ADDRESS OF SCHOOL | STUDY OR SPECIALIZATION | FROM | TO  | NO. OF MONTHS |
|----------------------------|-------------------------|------|-----|---------------|
| 1. [ ]                     | [ ]                     | [ ]  | [ ] | [ ]           |
| 2. [ ]                     | [ ]                     | [ ]  | [ ] | [ ]           |

**SECTION III MARITAL STATUS**

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: [ ]

2. NAME OF SPOUSE (Last) (First) (Middle) ( maiden)

3. DATE OF BIRTH [ ] 4. PLACE OF BIRTH (City, State, Country) [ ]

5. OCCUPATION [ ] 6. PRESENT EMPLOYER [ ]

7. CITIZENSHIP [ ] 8. FORMER CITIZENSHIP(S) COUNTRY(IES) [ ] 9. DATE U.S. CITIZENSHIP ACQUIRED [ ]

**SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE**

| NAME  | RELATIONSHIP | DATE AND PLACE OF BIRTH | CITIZENSHIP | PERMANENT ADDRESS |
|---|--------------|-------------------------|-------------|-------------------|
| 1. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE | [ ]          | [ ]                     | [ ]         | [ ]               |
| 2. <input type="checkbox"/> ADD <input type="checkbox"/> DELETE | [ ]          | [ ]                     | [ ]         | [ ]               |



SECRET

(When Filled In)

| SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL   |                               |  |                         |   |                |                    |                  |
|--|-------------------------------|--|-------------------------|---|----------------|--------------------|------------------|
| NAME OF REGION OR COUNTRY  | TYPE OF SPECIALIZED KNOWLEDGE | DATES OF TRAVEL OR RESIDENCE                   | DATE & PLACE OF STUDY   | KNOWLEDGE ACQUIRED BY--CHECK (X)              |                |                    |                  |
|  |                               |  |                         | RESIDENCE                                     | TRAVEL         | STUDY              | WORK ASSIGNMENT  |
|  |                               | Mar 22   | 3-43-44 '71             |   |                |                    |                  |
|  |                               |  |                         |   |                |                    |                  |
| SECTION VI TYPING AND STENOGRAPHIC SKILLS  |                               |  |                         |   |                |                    |                  |
| 1. TYPING (FPM) 2. SHORTHAND (RPM) 3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM.  |                               |  |                         |   |                |                    |                  |
| <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:  |                               |  |                         |   |                |                    |                  |
| SECTION VII SPECIAL QUALIFICATIONS   |                               |  |                         |   |                |                    |                  |
| PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.  |                               |  |                         |   |                |                    |                  |
| SECTION VIII MILITARY SERVICE  |                               |  |                         |   |                |                    |                  |
| CURRENT DRAFT STATUS   |                               |  |                         |   |                |                    |                  |
| 1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?  |                               |  |                         | 2. NEW CLASSIFICATION                         |                |                    |                  |
| <input type="checkbox"/> YES <input type="checkbox"/> NO   |                               |  |                         |   |                |                    |                  |
| 3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS  |                               |  |                         | 4. IF DEFERRED, GIVE REASON                   |                |                    |                  |
|  |                               |  |                         |   |                |                    |                  |
| MILITARY RESERVE, NATIONAL GUARD STATUS  |                               |  |                         |   |                |                    |                  |
| CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG  |                               |  |                         |   |                |                    |                  |
| <input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD<br><input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD |                               |  |                         |   |                |                    |                  |
| 1. CURRENT RANK, GRADE OR RATE   |                               | 2. DATE OF APPOINTMENT IN CURRENT RANK         |                         | 3. EXPIRATION DATE OF CURRENT OBLIGATION      |                |                    |                  |
|  |                               |  |                         |   |                |                    |                  |
| 4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED                              |                               |  |                         |   |                |                    |                  |
| 5. MILITARY MOBILIZATION ASSIGNMENT  |                               |  |                         | 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED |                |                    |                  |
|  |                               |  |                         |   |                |                    |                  |
| MILITARY SCHOOLS COMPLETED (Expanded Active, Reserve Duty, or as Civilian)   |                               |  |                         |   |                |                    |                  |
| NAME AND ADDRESS OF SCHOOL   |                               |  | STUDY OR SPECIALIZATION |   | DATE COMPLETED | PRESIDENT          | AGENCY SPONSORED |
|  |                               |  |                         |   |                |                    |                  |
| SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS  |                               |  |                         |   |                |                    |                  |
| NAME AND CHAPTER   |                               | ADDRESS (Number, Street, City, State, Country) |                         |   |                | DATE OF MEMBERSHIP |                  |
|  |                               |  |                         |   |                | FROM    TO         |                  |
| 1.   |                               |  |                         |   |                |                    |                  |
| 2.   |                               |  |                         |   |                |                    |                  |
| 3.   |                               |  |                         |   |                |                    |                  |
| SECTION X REMARKS  |                               |  |                         |   |                |                    |                  |
|  |                               |  |                         |   |                |                    |                  |
| DATE   |                               | SIGNATURE OF EMPLOYEE                          |                         |   |                |                    |                  |
| 17 MAR 1971  |                               |  |                         |   |                |                    |                  |

SECRET

**SECRET**  
(When Filled In)

**QUALIFICATIONS UPDATE**

**READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS**

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

|                  |  |                                     |                |
|------------------|--|-------------------------------------|----------------|
| <b>SECTION I</b> |  | <b>BIOGRAPHIC AND POSITION DATA</b> |                |
| EM               |  | DATE OF BIRTH                       | SD<br><b>D</b> |

|                           |  |                                |  |                          |  |  |  |
|---------------------------|--|--------------------------------|--|--------------------------|--|--|--|
| <b>SECTION II</b>         |  |                                |  | <b>HIGH SCHOOL</b>       |  |  |  |
| LAST HIGH SCHOOL ATTENDED |  | ADDRESS (City, State, Country) |  | YEARS ATTENDED (From-To) |  | GRADUATE<br><input type="checkbox"/> YES <input type="checkbox"/> NO |  |

| <b>COLLEGE OR UNIVERSITY STUDY</b>         |         |       |                        |                 |               |                              |
|--|---------|-------|------------------------|-----------------|---------------|------------------------------|
| NAME AND LOCATION OF COLLEGE OR UNIVERSITY | SUBJECT |       | YEARS ATTENDED FROM-TO | DEGREE RECEIVED | YEAR RECEIVED | NO. SEM/ QTR. HRS. (Specify) |
|  | MAJOR   | MINOR |                        |                 |               |                              |
| 1.   |         |       |                        |                 |               |                              |
| 2.   |         |       |                        |                 |               |                              |

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

| <b>TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS</b> |                         |      |    |               |
|--|-------------------------|------|----|---------------|
| NAME AND ADDRESS OF SCHOOL                       | STUDY OR SPECIALIZATION | FROM | TO | NO. OF MONTHS |
|  |                         |      |    |               |

| <b>OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE</b> |                         |      |    |               |
|---|-------------------------|------|----|---------------|
| NAME AND ADDRESS OF SCHOOL  | STUDY OR SPECIALIZATION | FROM | TO | NO. OF MONTHS |
| 1.  |                         |      |    |               |
| 2.  |                         |      |    |               |

|   |  |  |  |  |                       |  |                                   |  |  |
|---|--|--|--|--|-----------------------|--|-----------------------------------|--|--|
| <b>SECTION III</b>  |  |  |  |  | <b>MARITAL STATUS</b> |  |                                   |  |  |
| 1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: |  |  |  |  |                       |  |                                   |  |  |
| 2. NAME OF SPOUSE (Last) (First) (Middle) (Maiden)  |  |  |  |  |                       |  |                                   |  |  |
| 3. DATE OF BIRTH  |  |  | 4. PLACE OF BIRTH (City, State, Country) |  |                       |  |                                   |  |  |
| 5. OCCUPATION   |  |  | 6. PRESENT EMPLOYER                      |  |                       |  |                                   |  |  |
| 7. CITIZENSHIP  |  |  | 8. FORMER CITIZENSHIP(S) COUNTRY(IES)    |  |                       |  | 9. DATE U.S. CITIZENSHIP ACQUIRED |  |  |

| <b>SECTION IV</b> |   |              |                         |             |                   | <b>DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE</b> |  |  |  |  |  |
|-------------------|---|--------------|-------------------------|-------------|-------------------|--|--|--|--|--|--|
|                   | NAME  | RELATIONSHIP | DATE AND PLACE OF BIRTH | CITIZENSHIP | PERMANENT ADDRESS |  |  |  |  |  |  |
| 1.                | <input type="checkbox"/> ADD<br><input type="checkbox"/> DELETE |              |                         |             |                   |  |  |  |  |  |  |
| 2.                | <input type="checkbox"/> ADD<br><input type="checkbox"/> DELETE |              |                         |             |                   |  |  |  |  |  |  |

SECRET

(When Filled In)

| SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL  |  |   |                                       |   |   |        |                 |
|---|--|---|---------------------------------------|---|---|--------|-----------------|
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE          | DATES OF TRAVEL OR RESIDENCE  | DATE & PLACE OF STUDY                 | KNOWLEDGE ACQUIRED BY (CHECK ALL)             |   |        |                 |
|   |  |   |                                       | RESIDENCE                                     | TRAVEL                                  | STUDY  | WORK ASSIGNMENT |
| 1.  |  |   | APR 24                                | 2   | 15                                      | PH '70 |                 |
| 2.  |  |   |                                       |   |   |        |                 |
| SECTION VI TYPING AND STENOGRAPHIC SKILLS   |  |   |                                       |   |   |        |                 |
| 1. TYPING (WPM)   | 2. SHORTHAND (WPM)                     | 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM  |                                       |   |   |        |                 |
|   |  | <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY: |                                       |   |   |        |                 |
| SECTION VII SPECIAL QUALIFICATIONS  |  |   |                                       |   |   |        |                 |
| PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.   |  |   |                                       |   |   |        |                 |
|   |  |   |                                       |   |   |        |                 |
| SECTION VIII MILITARY SERVICE   |  |   |                                       |   |   |        |                 |
| CURRENT DRAFT STATUS  |  |   |                                       |   |   |        |                 |
| 1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?   |  |   |                                       | 2. NEW CLASSIFICATION                         |   |        |                 |
| <input type="checkbox"/> YES <input type="checkbox"/> NO  |  |   |                                       |   |   |        |                 |
| 3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS   |  |   |                                       | 4. IF DEFERRED, GIVE REASON                   |   |        |                 |
|   |  |   |                                       |   |   |        |                 |
| MILITARY RESERVE, NATIONAL GUARD STATUS   |  |   |                                       |   |   |        |                 |
| CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG   |  | <input type="checkbox"/> ARMY   | <input type="checkbox"/> MARINE CORPS | <input type="checkbox"/> COAST GUARD          | <input type="checkbox"/> NATIONAL GUARD |        |                 |
|   |  | <input type="checkbox"/> NAVY   | <input type="checkbox"/> AIR FORCE    | <input type="checkbox"/> AIR NATIONAL GUARD   |   |        |                 |
| 1. CURRENT RANK, GRADE OR RATE  | 2. DATE OF APPOINTMENT IN CURRENT RANK | 3. EXPIRATION DATE OF CURRENT OBLIGATION  |                                       |   |   |        |                 |
|   |  |   |                                       |   |   |        |                 |
| 4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED |  |   |                                       |   |   |        |                 |
| 5. MILITARY MOBILIZATION ASSIGNMENT:  |  |   |                                       | 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED |   |        |                 |
|   |  |   |                                       |   |   |        |                 |
| MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)  |  |   |                                       |   |   |        |                 |
| NAME AND ADDRESS OF SCHOOL  |  |   | STUDY OR SPECIALIZATION               | DATE COMPLETED                                | RESIDENT                                |        |                 |
|   |  |   |                                       |   | AGENCY SPONSORED                        |        |                 |
|   |  |   |                                       |   |   |        |                 |
| SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS   |  |   |                                       |   |   |        |                 |
| NAME AND CHAPTER  |  | ADDRESS (Number, Street, City, State, Country)  |                                       |   | DATE OF MEMBERSHIP                      |        |                 |
|   |  |   |                                       |   | FROM TO                                 |        |                 |
| 1.  |  |   |                                       |   |   |        |                 |
| 2.  |  |   |                                       |   |   |        |                 |
| 3.  |  |   |                                       |   |   |        |                 |
| SECTION X REMARKS   |  |   |                                       |   |   |        |                 |
|   |  |   |                                       |   |   |        |                 |
| DATE  |  | SIGNATURE   |                                       |   |   |        |                 |
| 4/23/70   |  | [Redacted Signature]  |                                       |   |   |        |                 |

SECRET

**SECRET**  
(WHEN FILLED IN)

**QUALIFICATIONS SYSTEM RECORD CHANGE**

| APPLICANT CODING DATA |              |                        |               |    |    |
|-----------------------|--------------|------------------------|---------------|----|----|
| 1. ID                 | 2. APPL. NO. | 3. NAME                |               |    |    |
| < 2                   | 6-DIGITS     | MUST CONTAIN 20-DIGITS |               |    |    |
| 4. DATE OF BIRTH      |              |                        | 5. DATE CODED |    |    |
| MO                    | DA           | YR                     | MO            | DA | YR |
|                       |              |                        |               |    |    |

THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.

| LANGUAGE CODING DATA - FORM 444c |                 |           |    |                  |                       |   |  |   |   |   |   |    |
|----------------------------------|-----------------|-----------|----|------------------|-----------------------|---|--|---|---|---|---|----|
| 1. ID                            | 2. EMPLOYEE NO. | 3. NAME   |    |                  | 4. LANGUAGE DATA CODE |   |  |   |   |   |   |    |
| < 3                              |                 | 3-LETTERS |    |                  | BASE CODE             | R | W  | P | S | U | T | YR |
| 5. DATE SUBMITTED                |                 |           |    | 6. DATE OF BIRTH |                       |   | 7. WHEN FORM 444c DENOTES NO LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO+LANGUAGE" (12-DIGITS) |   |   |   |   |    |
| MO                               | DA              | YR        | MO | DA               | YR                    |   |  |   |   |   |   |    |
|                                  |                 |           |    |                  |                       |   |  |   |   |   |   |    |

| LANGUAGE PROFICIENCY TEST DATA |                 |         |   |   |                 |                              |    |   |    |    |   |   |    |
|--------------------------------|-----------------|---------|---|---|-----------------|------------------------------|----|---|----|----|---|---|----|
| 1. ID                          | 2. EMPLOYEE NO. | 3. NAME |   |   | 4. CODE         | 5. LANGUAGE DATA BEFORE TEST |    |   |    |    |   |   |    |
| < 5                            |                 |         |   |   | C=A-D           | BASE CODE                    | R  | W   | P  | S  | U | T | YR |
| 6. LANGUAGE DATA AFTER TEST    |                 |         |   |   | 7. DATE OF TEST |                              |    | 8. DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1275 LANGUAGE PROFICIENCY AND AWARDS DATA. |    |    |   |   |    |
| BASE CODE                      | R               | W       | P | S | U               | T                            | YR | MO  | DA | YR |   |   |    |
| NO+L                           | A               | N       | G | U | A               | G                            | E  | 09  | 02 | 69 |   |   |    |

| QUALIFICATIONS RECORD CHANGE |                 |           |   |   |  |      |          |   |   |    |  |
|------------------------------|-----------------|-----------|---|---|--|------|----------|---|---|----|--|
| 1. ID                        | 2. EMP/APPL NO. | 3. NAME   |   |   | 4. ENTER UNDER "TYPE" -  |      |          |   |   |    |  |
| < 4                          |                 | 3-LETTERS |   |   | A - ADDITION TO RECORD<br>C - CHANGE TO EXISTING RECORD<br>D - DELETION OF DATA FROM EXISTING RECORD |      |          |   |   |    |  |
| TYPE                         | CODE # 1        |           |   |   |  |      | CODE # 2 |   |   |    |  |
|                              | BASE            | 1         | 2 | 3 | YR   | BASE | 1        | 2 | 3 | YR |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |
|                              |                 |           |   |   |  |      |          |   |   |    |  |

SECRET

(When Filled In)

LLC

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA

Blank box for biographic and position data.

SECTION II EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED, ADDRESS (City, State, Country), YEARS ATTENDED (From-To), GRADUATE (YES/NO)

COLLEGE OR UNIVERSITY STUDY

Table with columns: NAME AND LOCATION OF COLLEGE OR UNIVERSITY, SUBJECT (MAJOR, MINOR), YEARS ATTENDED FROM-TO, DEGREE RECEIVED, YEAR RECEIVED, NO. SEM/STR. HRS. (Specify)

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL, AND SPECIALIZED SCHOOLS

Table with columns: NAME AND ADDRESS OF SCHOOL, STUDY OR SPECIALIZATION, FROM, TO, NO. OF MONTHS

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

Table with columns: NAME AND ADDRESS OF SCHOOL, STUDY OR SPECIALIZATION, FROM, TO, NO. OF MONTHS

SECTION III MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY; 2. NAME OF SPOUSE (Last, First, Middle, Maiden); 3. DATE OF BIRTH; 4. PLACE OF BIRTH (City, State, Country); 5. OCCUPATION; 6. PRESENT EMPLOYER; 7. CITIZENSHIP; 8. FORMER CITIZENSHIP(S) COUNTRY(IES); 9. DATE U.S. CITIZENSHIP ACQUIRED

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

Table with columns: ADD/DELETE, CITIZENSHIP, PERMANENT ADDRESS

SECRET  
(When Filled In)

| SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL  |  |  |   |   |   |                                     |
|---|--|--|---|---|---|-------------------------------------|
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE          | DATES OF TRAVEL OR RESIDENCE                                   | OFFICE OF PERSONNEL                       |   | COURSE ACQUIRED BY - CHECK ONE          |                                     |
|   |  |  | DATE & PLACE OF STUDY                     | RESIDENCE                                   | TRAVEL                                  | STUDY                               |
|   |  |  | APR 22                                    | 9 12 AM '68                                 |   |                                     |
|   |  |  |   |   |   |                                     |
| SECTION VI TYPING AND STENOGRAPHIC SKILLS   |  |  |   |   |   |                                     |
| 1. TYPING (PPM)   | 2. SHORTHAND (NPM)                     | 3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM |   |   |   |                                     |
|   |  | <input type="checkbox"/> GREGG                                 | <input type="checkbox"/> SPEEDWRITING     | <input type="checkbox"/> STENOTYPE          | <input type="checkbox"/> OTHER SPECIFY: |                                     |
| SECTION VII SPECIAL QUALIFICATIONS  |  |  |   |   |   |                                     |
| PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED. |  |  |   |   |   |                                     |
| SECTION VIII MILITARY SERVICE   |  |  |   |   |   |                                     |
| CURRENT DRAFT STATUS  |  |  |   |   |   |                                     |
| 1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?   |  |  | 2. NEW CLASSIFICATION                     |   |   |                                     |
| <input type="checkbox"/> YES <input type="checkbox"/> NO  |  |  |   |   |   |                                     |
| 3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS   |  |  | 4. IF DEFERRED, GIVE REASON               |   |   |                                     |
|   |  |  |   |   |   |                                     |
| MILITARY RESERVE, NATIONAL GUARD STATUS   |  |  |   |   |   |                                     |
| CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG   |  | <input type="checkbox"/> ARMY                                  | <input type="checkbox"/> MARINE CORPS     | <input type="checkbox"/> COAST GUARD        | <input type="checkbox"/> NATIONAL GUARD |                                     |
|   |  | <input type="checkbox"/> NAVY                                  | <input type="checkbox"/> AIR FORCE        | <input type="checkbox"/> AIR NATIONAL GUARD |   |                                     |
| 1. CURRENT RANK, GRADE OR RATE  | 2. DATE OF APPOINTMENT IN CURRENT RANK | 3. EXPIRATION DATE OF CURRENT OBLIGATION                       |   |   |   |                                     |
|   |  |  |   |   |   |                                     |
| 4. CHECK CURRENT RESERVE CATEGORY   |  | <input type="checkbox"/> READY RESERVE                         | <input type="checkbox"/> STANDBY (ACTIVE) | <input type="checkbox"/> STANDBY (INACTIVE) | <input type="checkbox"/> RETIRED        | <input type="checkbox"/> DISCHARGED |
| 5. MILITARY MODULIZATION ASSIGNMENT   |  | 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED                  |   |   |   |                                     |
|   |  |  |   |   |   |                                     |
| MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)                                    |  |  |   |   |   |                                     |
| NAME AND ADDRESS OF SCHOOL  |  | STUDY OR SPECIALIZATION  | DATE COMPLETED                            |   |   |                                     |
|   |  |  |   |   |   |                                     |
| SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS   |  |  |   |   |   |                                     |
| NAME AND CHAPTER  |  | ADDRESS (Number, Street, City, State, Country)                 |   |   | DATE OF MEMBERSHIP                      |                                     |
|   |  |  |   |   | FROM TO                                 |                                     |
|   |  |  |   |   |   |                                     |
|   |  |  |   |   |   |                                     |
| SECTION X REMARKS   |  |  |   |   |   |                                     |
|   |  |  |   |   |   |                                     |
| DATE  |  | SIGNATURE  |   |   |   |                                     |
| 4/18/68   |  |  |   |   |   |                                     |

SECRET

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OFFICIAL USE ONLY (When Filled In) *llc*

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION I

1. GEOGRAPHIC AND POSITION DATA

2. SCHEDULE GRADE STEP

GS-10-04

3. OFFICE OF ASSIGNMENT

OPPD

4. LOCATION OF ASSIGNMENT

WASH, D.C.

SECTION II

AGENCY OVERSEAS SERVICE

| AREA       | TYPE TOUR | FROM     | TO       |
|------------|-----------|----------|----------|
| [Redacted] | PCS 56    | 52/09/01 | 58/06/01 |
|            | PCS IRR   | 64/08/26 | 66/06/12 |
|            | PCS 59    | 59/06/15 | 61/05/26 |
|            | PCS 56    | 56/06/15 | 59/06/18 |

OVERSEAS DATA

COPIED

DATE: 31 MAY 67

INITIALS: [Signature]

SECTION III

EDUCATION

| DEGREE     | MAJOR FIELD                             | COURSE                    | YEAR |
|------------|---|---------------------------|------|
| BACH. HIST | POLITICAL SCIENCE (GOVERNMENT), GENERAL | CAL UNIV Berkeley         | 48   |
|            | INTERNATIONAL RELATIONS, GENERAL        | GEORGE WASHINGTON UNIV DC | 48   |

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

UNCLASSIFIED





SECRET

(When Filled In)

| SECTION VI   |  | MARITAL STATUS                   |             |  |  |  |  |
|--|--|----------------------------------|-------------|--|--|--|--|
| 1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried, S.P.C.R.) |  |                                  |             |  |  |  |  |
| 2. NAME OF SPOUSE<br>Last: _____ First: _____ Middle: _____ Maiden: _____                        |  |                                  |             |  |  |  |  |
| 3. DATE OF BIRTH   | 4. PLACE OF BIRTH (City, State, Country)       |                                  |             |  |  |  |  |
| 5. OCCUPATION  | 6. PRESENT EMPLOYER                            |                                  |             |  |  |  |  |
| 7. CITIZENSHIP   | 8. FORMER CITIZENSHIPS, COUNTRIES              | 9. DATE U.S. CITIZENSHIP ASSUMED |             |  |  |  |  |
| SECTION VII  |  |                                  |             |  |  |  |  |
| DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE  |  |                                  |             |  |  |  |  |
| NAME   | RELATIONSHIP                                   | DATE AND PLACE OF BIRTH          | CITIZENSHIP |  |  |  |  |
| [Redacted]   |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
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|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
| SECTION VIII   |  |                                  |             |  |  |  |  |
| PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS   |  |                                  |             |  |  |  |  |
| NAME AND CHAPTER   | ADDRESS (Number, Street, City, State, Country) | DATE OF MEMBERSHIP               |             |  |  |  |  |
|  |  | FROM                             | TO          |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
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|  |  |                                  |             |  |  |  |  |
|  |  |                                  |             |  |  |  |  |
| DATE   |  |                                  |             |  |  |  |  |
| 3/22/67  | [Redacted]                                     |                                  |             |  |  |  |  |

SECRET

# FEDERAL AND MILITARY SERVICE

aining creditable service for *leave purposes* and retention credits complete Part I and the Personnel Office should complete Parts II

IF PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

2. DATE OF BIRTH

1 October 1915

LIST OF COLUMBIA SERVICE YOU HAVE HAD

9. RETENTION GROUP

10. CSC STATUS (For permanent employees only)

YES  NO

11. SERVICE

YEAR MONTH DAY

Excepted Appointment

SCD 8-6-42  
you had  
9-19-57  
R2

CIA 1962 9 28

4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."

| BRANCH     | FROM— |       |     | TO—  |       |     | DISCHARGE (Hon. or dishon.?) |
|------------|-------|-------|-----|------|-------|-----|------------------------------|
|            | YEAR  | MONTH | DAY | YEAR | MONTH | DAY |                              |
| U. S. Navy | 1928  | 8     | 6   | 1946 | 6     | 25  | Inactive status              |

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR?  YES  NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.

| TYPE OF ABSENCE (LWOP, Furl, Susp, AWOL, Mer Mat) | FROM— |       |     | TO—  |       |     | TOTAL |        |      |
|---|-------|-------|-----|------|-------|-----|-------|--------|------|
|   | YEAR  | MONTH | DAY | YEAR | MONTH | DAY | YEARS | MONTHS | DAYS |
|   |       |       |     |      |       |     |       |        |      |

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?  YES  NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)

7. ARE YOU:  
 A. THE WIFE OF A DISABLED VETERAN?  YES  NO  
 B. THE MOTHER OF A DECEASED OR DISABLED VETERAN?  YES  NO  
 C. THE UNREMARKED WIDOW OF A VETERAN?  YES  NO

8. TO BE CALCULATED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS.

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_ (MONTH) \_\_\_\_\_ (YEAR) \_\_\_\_\_ (STATE)

SEAL

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

10-6825-1

SECRET

(When Filled In)

PERIODIC SUPPLEMENT  
PERSONAL HISTORY STATEMENT

THIS DATE

SEP

INSTRUCTIONS

This form provides the means whereby your official personnel records will be kept current. Even though it duplicates information you have furnished previously, it will be necessary for you to complete Sections I through VI in their entirety. You need complete Sections VII through VIII only if there has been a change since you entered on duty with the organization or if you believe the data requires more complete coverage than you have previously reported.

GENERAL

SECTION I

[Empty form area for Section I]

SECRET

(When Filled In)

SECTION III CONTINUED FROM PAGE 1

21. DATES OF MILITARY SERVICE OF SPOUSE (From and To) BY MONTH AND YEAR

22. BRANCH OF SERVICE *N.A.*

23. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED *N.A.*

24. [Redacted]

25. [Redacted]

4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES

5. CITIZENSHIP (Country)

6. FREQUENCY OF CONTACT

7. DATE OF LAST CONTACT

1. FULL NAME (Last-First-Middle)

2. RELATIONSHIP

3. AGE

4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES

5. CITIZENSHIP (Country)

6. FREQUENCY OF CONTACT

7. DATE OF LAST CONTACT

1. FULL NAME (Last-First-Middle)

2. RELATIONSHIP

3. AGE

4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES

5. CITIZENSHIP (Country)

6. FREQUENCY OF CONTACT

7. DATE OF LAST CONTACT

26. [Redacted]

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?  YES  NO

2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, (NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS)  YES  NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE?  YES  NO

4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.

5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS.  
*Very limited dividends from mutual fund investment.*

SECTION V CONTINUED TO PAGE 5

SECRET

SECRET

(When Filled In)

SECTION V CONTINUED FROM PAGE 2

6. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS

| INSTITUTION | ADDRESS (City, State, Country) |
|-------------|--------------------------------|
|             | Conn. Ave, D.C., USA           |
|             |                                |
|             |                                |

7. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY?  YES  NO

8. IF YOU HAVE ANSWERED "YES" TO QUESTION 7 ABOVE, GIVE PARTICULARS, INCLUDING COURT AND DATE(S)

SECTION VI CITIZENSHIP

1. COUNTRY OF CURRENT CITIZENSHIP: U.S.A.

2. CITIZENSHIP ACQUIRED BY - CHECK (X) ONE:  
 BIRTH  MARRIAGE  OTHER (Specify):

3. HAVE YOU TAKEN STEPS TO CHANGE YOUR PRESENT CITIZENSHIP?  YES  NO

4. GIVE PARTICULARS

5. IF YOU HAVE APPLIED FOR U.S. CITIZENSHIP, INDICATE PRESENT STATUS OF YOUR APPLICATION (Pass papers, etc.)

SECTION VII EDUCATION

1. CHECK (X) HIGHEST LEVEL OF EDUCATION ATTAINED:

|   |  |
|---|--|
| <input type="checkbox"/> LESS THAN HIGH SCHOOL GRADUATE                 | <input type="checkbox"/> OVER 120 YEARS OF COLLEGE - NO DEGREE                               |
| <input type="checkbox"/> HIGH SCHOOL GRADUATE                           | <input type="checkbox"/> BACHELOR'S DEGREE   |
| <input type="checkbox"/> TRADE, BUSINESS, OR COMMERCIAL SCHOOL GRADUATE | <input type="checkbox"/> GRADUATE STUDY LEADING TO HIGHER DEGREE                             |
| <input type="checkbox"/> TWO YEARS COLLEGE OR LESS                      | <input checked="" type="checkbox"/> MASTER'S DEGREE <input type="checkbox"/> DOCTORAL DEGREE |

2. COLLEGE OR UNIVERSITY STUDY

| NAME AND LOCATION OF COLLEGE OR UNIVERSITY | SUBJECT | DATES ATTENDED | DEGREE | SEM/OTR HRS. COMPLETED (Specify) |
|--|---------|----------------|--------|----------------------------------|
|  |         |                |        |                                  |
|  |         |                |        |                                  |
|  |         |                |        |                                  |
|  |         |                |        |                                  |

3. COMMERCIAL AND SPECIALIZED SCHOOLS

| NAME OF SCHOOL | STUDY OR SPECIALIZATION | DATES ATTENDED |    | TOTAL HOURS |
|----------------|-------------------------|----------------|----|-------------|
|                |                         | FROM           | TO |             |
|                |                         |                |    |             |
|                |                         |                |    |             |

4. MILITARY TRAINING (Full time duty in specialized schools such as Ordnance, Intelligence, Communications, etc.)

|  | DATES ATTENDED |           | TOTAL HOURS |
|--|----------------|-----------|-------------|
|  | FROM           | TO        |             |
|  | June 1942      | June 1943 | 54          |

5. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

SECRET

| SECTION VIII<br>GEOGRAPHIC AREA KNOWLEDGE   |                               |                                  |                       |   |                  |                 |
|---|-------------------------------|----------------------------------|-----------------------|---|------------------|-----------------|
| 1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF RESIDENCE, TRAVEL, STUDY OR WORK ASSIGNMENT OTHER THAN ORGANIZATION EXPERIENCE. UNDER COLUMN "TYPE OF SPECIALIZED KNOWLEDGE," INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, COASTS, HARBORS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC. |                               |                                  |                       |   |                  |                 |
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE | DATES OF RESIDENCE, TRAVEL, ETC. | KNOWLEDGE ACQUIRED BY |   |                  |                 |
|   |                               |                                  | RESIDENCE             | TRAVEL  | STUDY            | WORK ASSIGNMENT |
|   |                               | <i>1941-1945</i>                 |                       |   |                  |                 |
| REGIONS OR COUNTRIES LISTED ABOVE   |                               |                                  |                       |   |                  |                 |
| 3. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES OF WHICH YOU HAVE GAINED KNOWLEDGE AS A RESULT OF ORGANIZATION ASSIGNMENT OR ACTIVITY.   |                               |                                  |                       |   |                  |                 |
| NAME OF REGION OR COUNTRY   | TYPE OF SPECIALIZED KNOWLEDGE | DATES OF RESIDENCE, TRAVEL, ETC. | KNOWLEDGE ACQUIRED BY |   |                  |                 |
|   |                               |                                  | WORKS ASSIGNMENT      | FIELD ASSIGNMENT                                      | TRAINING         |                 |
|   |                               |                                  |                       |   |                  |                 |
|   |                               |                                  |                       |   |                  |                 |
|   |                               |                                  |                       |   |                  |                 |
|   |                               |                                  |                       |   |                  |                 |
|   |                               |                                  |                       |   |                  |                 |
|   |                               |                                  |                       |   |                  |                 |
| SECTION IX<br>TYPING AND STENOGRAPHIC SKILLS  |                               |                                  |                       |   |                  |                 |
| 1. TYPING (P.P.M.)  |                               | 2. SHORTHAND (P.P.M.)            |                       | 3. SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM |                  |                 |
|   |                               | GREGG                            | SPEEDWRITING          | STENOGRAPH  | OTHER (Specify): |                 |
| 4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Comptometer, Mimeo-graph, Card Punch, etc.) <i>Accounting, 7110004, etc</i>   |                               |                                  |                       |   |                  |                 |
| SECTION X<br>SPECIAL QUALIFICATIONS   |                               |                                  |                       |   |                  |                 |
| 1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. <i>Photography - good - oil paints. Tape recording. Hi-Fi - handy at setting up, etc. General radio interests</i>  |                               |                                  |                       |   |                  |                 |
| 2. INDICATE ANY SPECIAL QUALIFICATIONS, RESULTING FROM EXPERIENCE OR TRAINING, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK  |                               |                                  |                       |   |                  |                 |
| 3. EXCLUDING EQUIPMENT NOTED IN SECTION 5, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT OR MACHINES SUCH AS OPERATION OF ENCRYPTIVE RADIO, MULTIFILM, TURRET LATHE, SCIENTIFIC AND PROFESSIONAL DEVICES, ETC.  |                               |                                  |                       |   |                  |                 |
| 4. IF YOU ARE A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, ETC.), INDICATE THE KIND OF LICENSE OR CERTIFICATE, NAME OF ISSUING STATE, AND REGISTRATION NUMBER, IF KNOWN.  |                               |                                  |                       |   |                  |                 |
| 5. FIRST LICENSE OR CERTIFICATE (Year of issue)   |                               |                                  |                       | 6. LATEST LICENSE OR CERTIFICATE (Year of issue)      |                  |                 |

SECRET  
(When Filled In)

SECTION X CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES TO WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED. *Chair of Calif. drug & labor, 3rd & 4th Dist. Belonged to a Pol. Sci. Honor Society, none for post.*

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

| 1. INCLUSIVE DATES (From and To) | 2. GRADE  | 3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT | 4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION | 5. OFFICIAL POSITION TITLE      | 6. DESCRIPTION OF DUTIES |
|----------------------------------|-----------|---|---|---------------------------------|--------------------------|
| <i>EOD to Nov '53 Mar '54</i>    | <i>14</i> | <i>DDP/FE/1</i>                         | <i>?</i>  | <i>Deputy Chief</i>             |                          |
| <i>MAR '54 June '56</i>          | <i>14</i> | <i>DDP/FE/1</i>                         |   |                                 |                          |
| <i>Sept '56 Sept '57</i>         | <i>14</i> | <i>DDP/FE/1</i>                         | <i>28</i>   | <i>Various but mainly CFE/1</i> |                          |
| <i>SEPT '57 --</i>               | <i>14</i> | <i>DDP/FE</i>                           | <i>12</i>   | <i>C/FE/FE</i>                  |                          |

(Use additional pages if required)

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3

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(When Filled In)

SECTION III CHILDREN AND OTHER DEPENDENTS

1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.



6

2. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepparents, sister, etc.) WHO DEPEND ON YOU FOR AT LEAST 50% OF THEIR SUPPORT, OR, CHILDREN OVER 21 YEARS OF AGE WHO ARE NOT SELF-SUPPORTING.



1

3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS

| NAME | RELATIONSHIP | YEAR OF BIRTH | SEX | CITIZENSHIP | ADDRESS |
|------|--------------|---------------|-----|-------------|---------|
|      |              |               |     |             |         |

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING PAGE

[Large empty box for additional comments]

DATE COMPLETED

10/4/57

SIGNATURE OF EMPLOYEE

[Redacted signature box]

SECRET

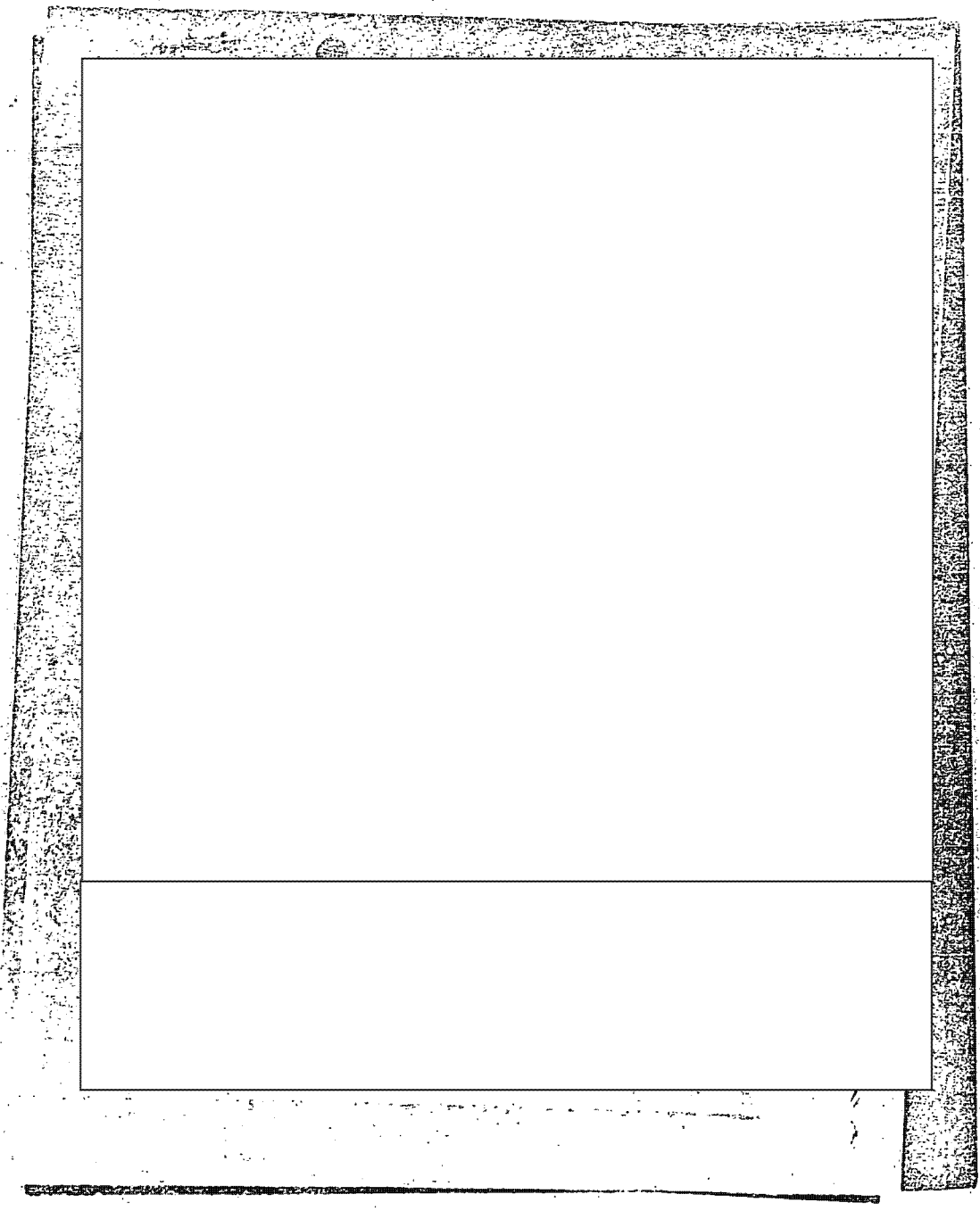


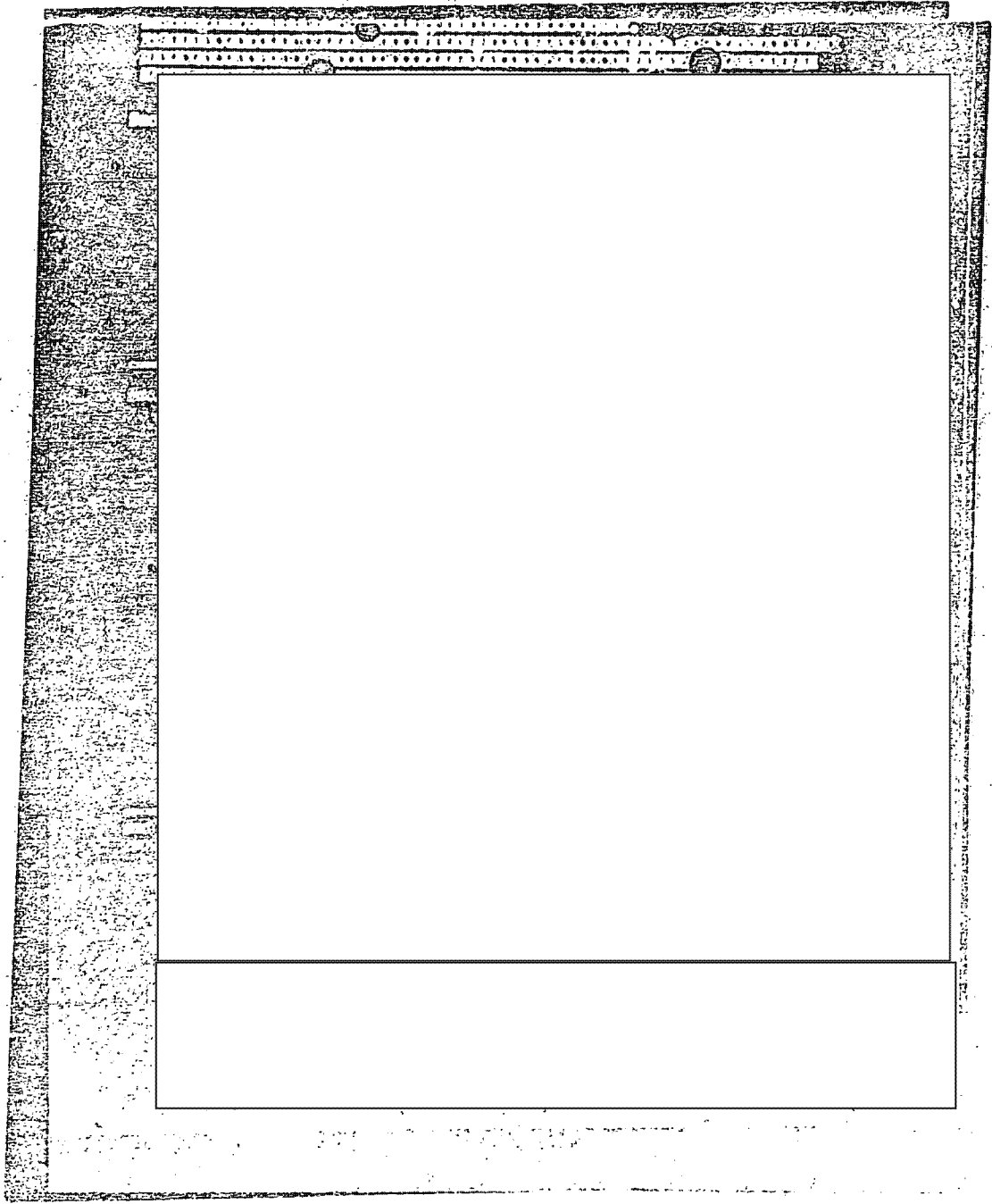


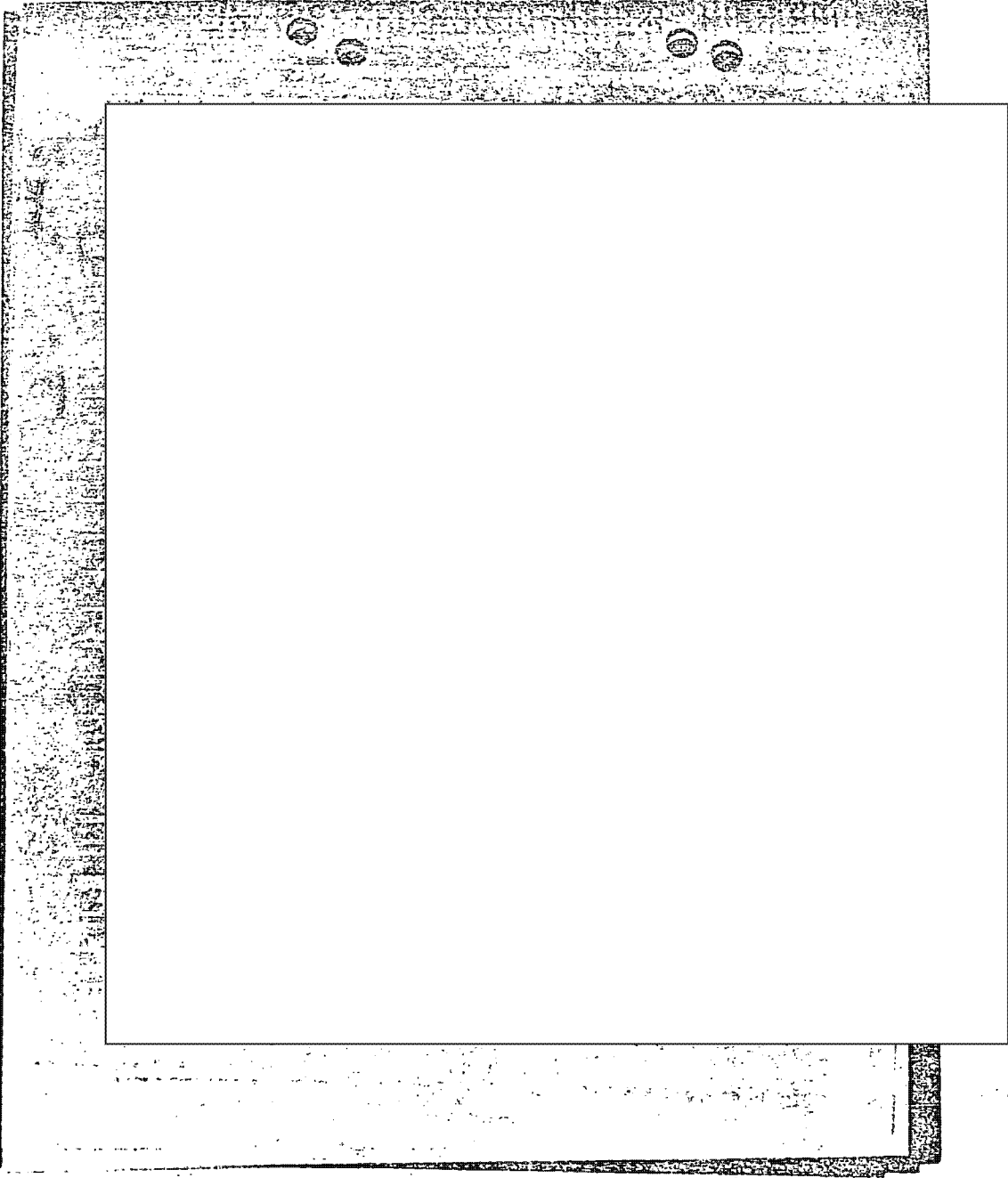
PERSONAL HISTORY STATEMENT

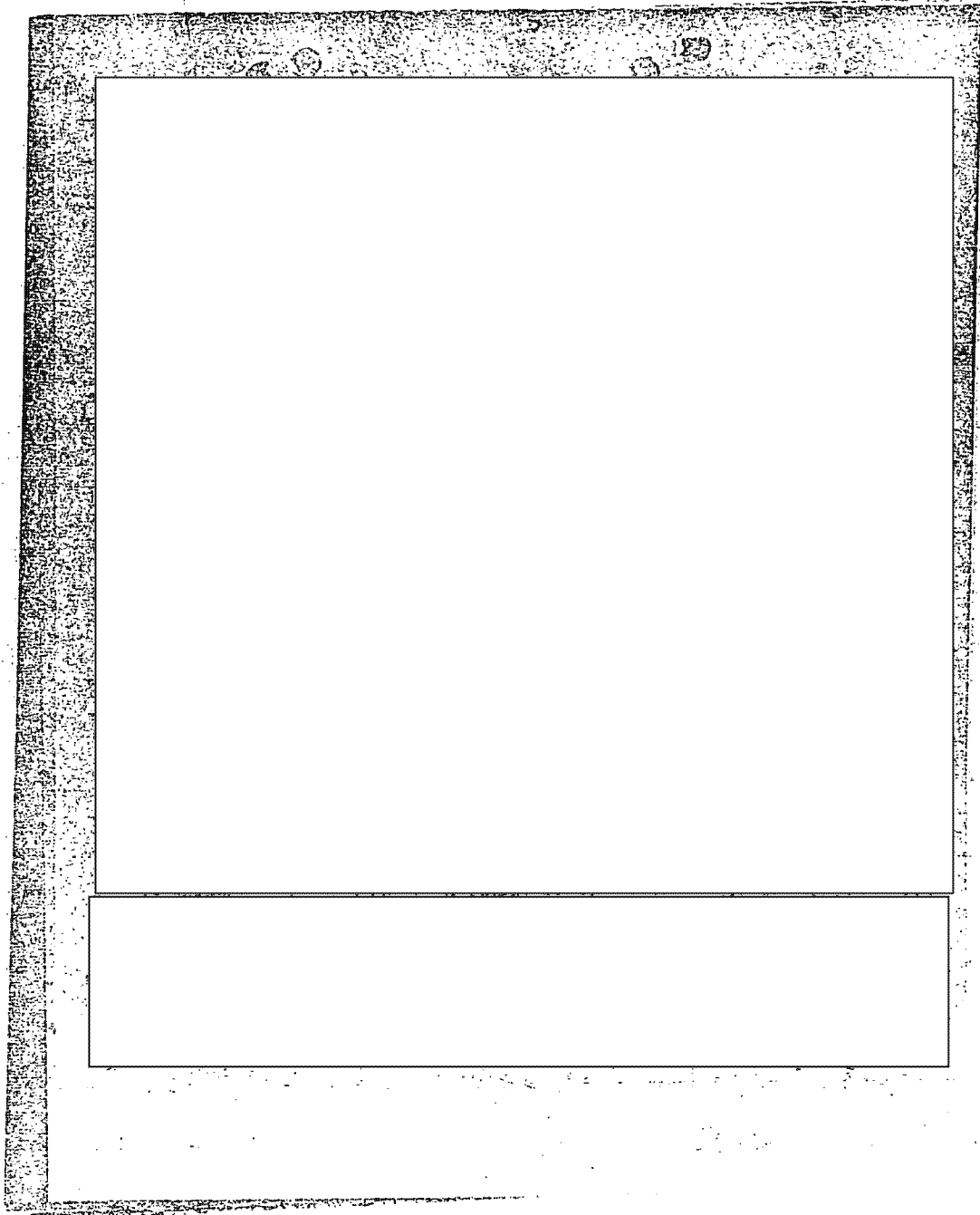
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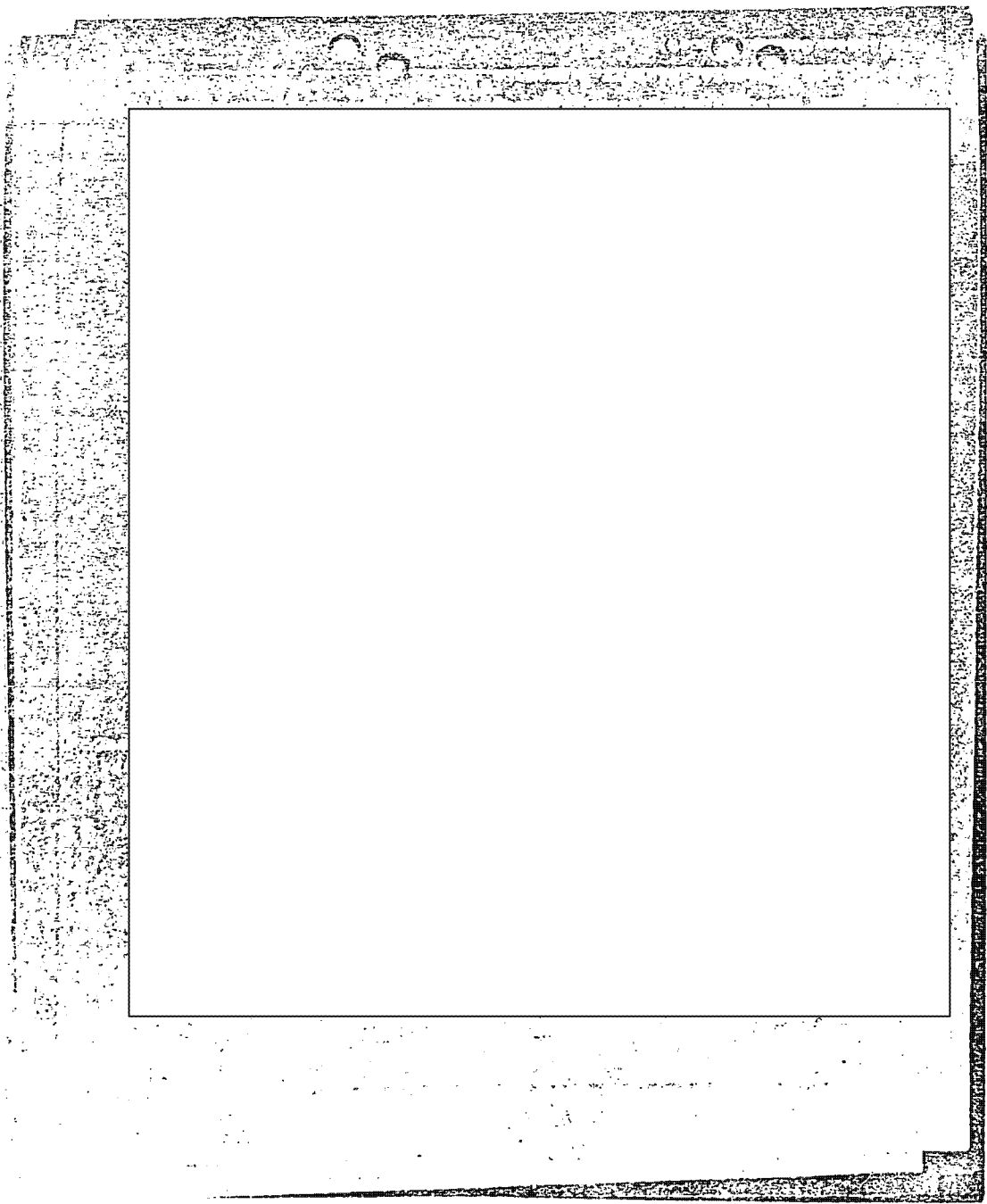
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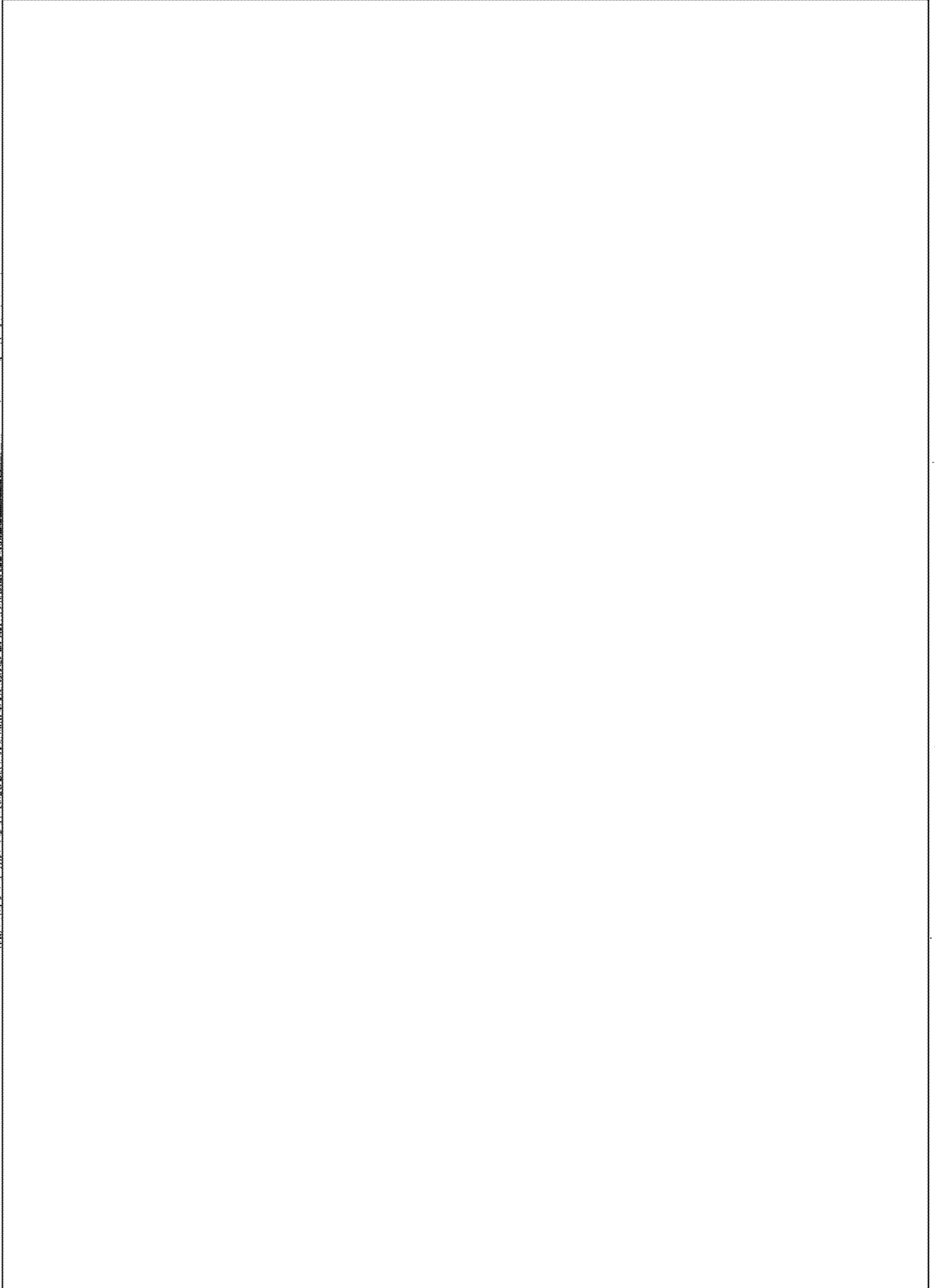
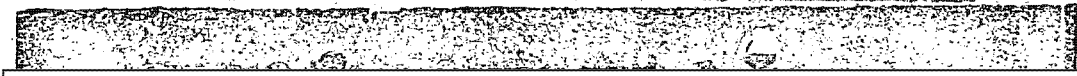


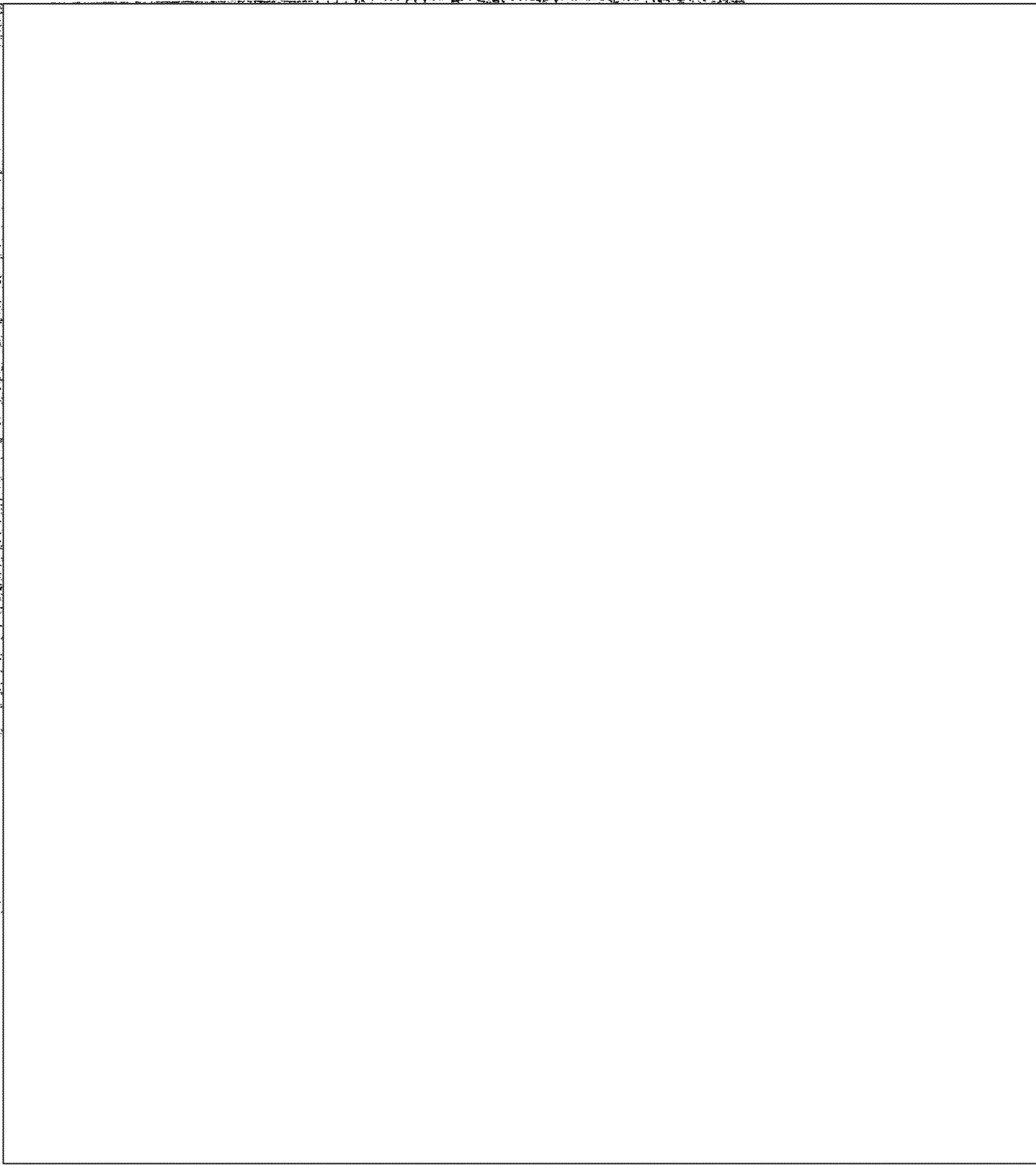




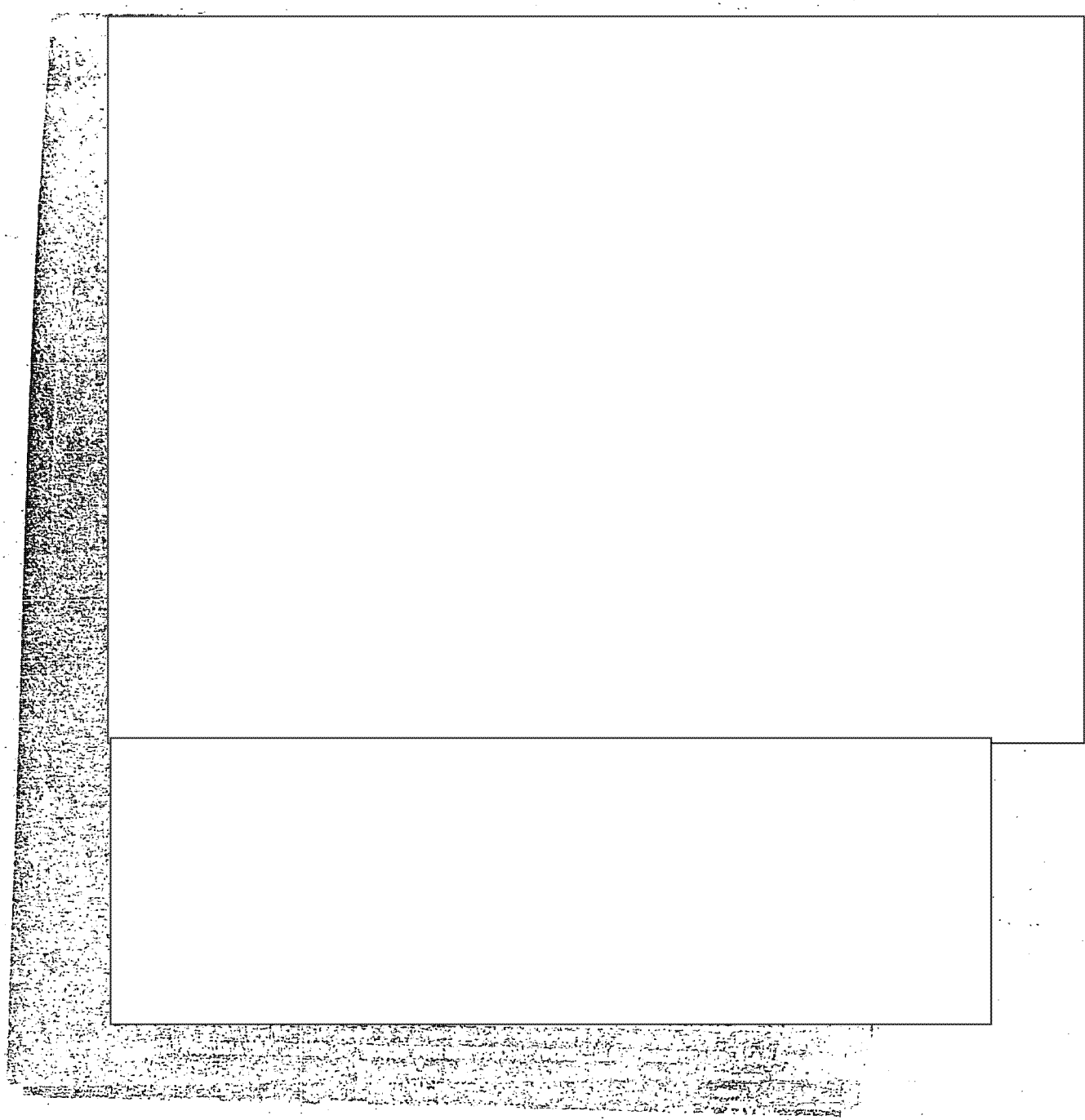


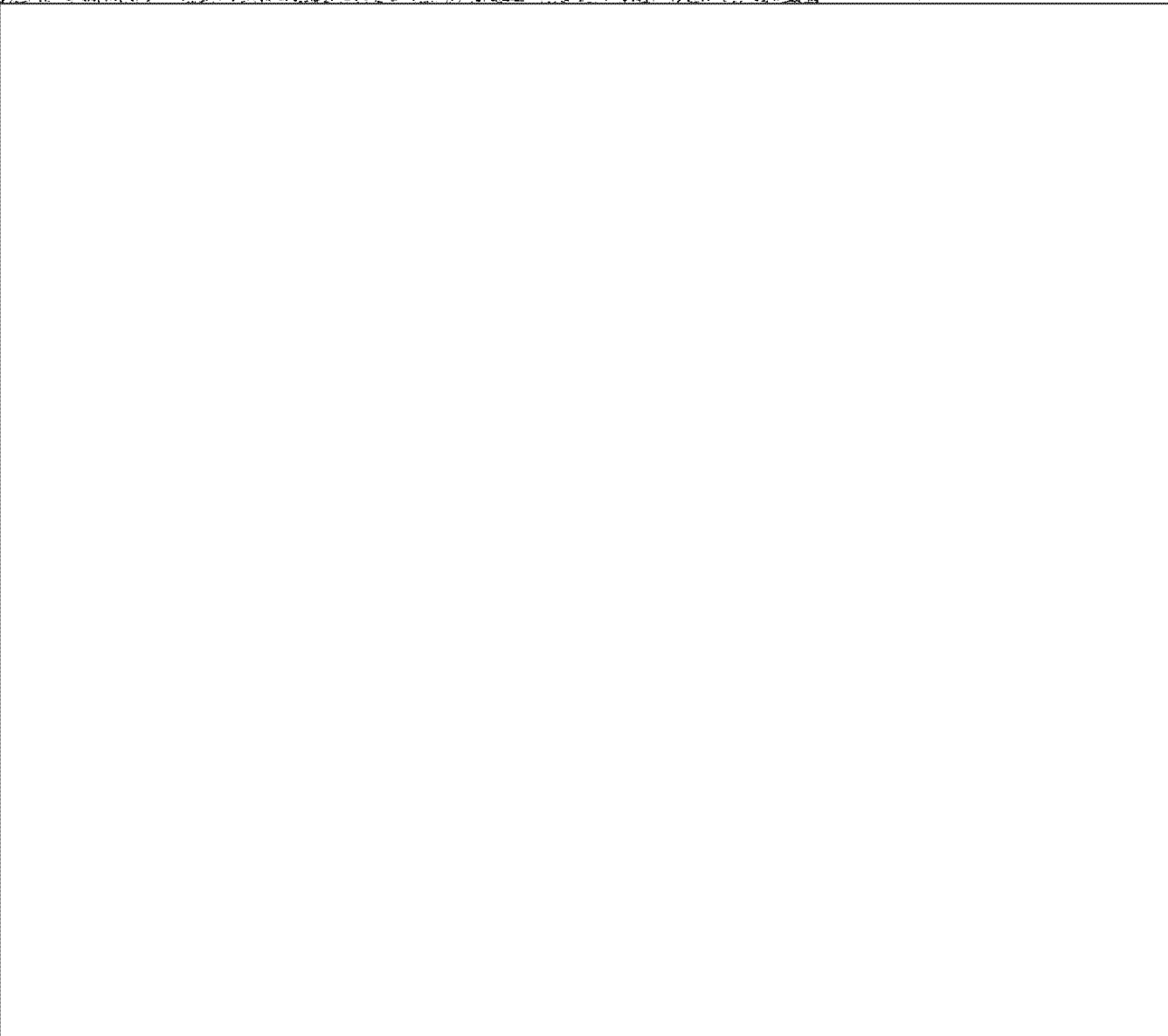
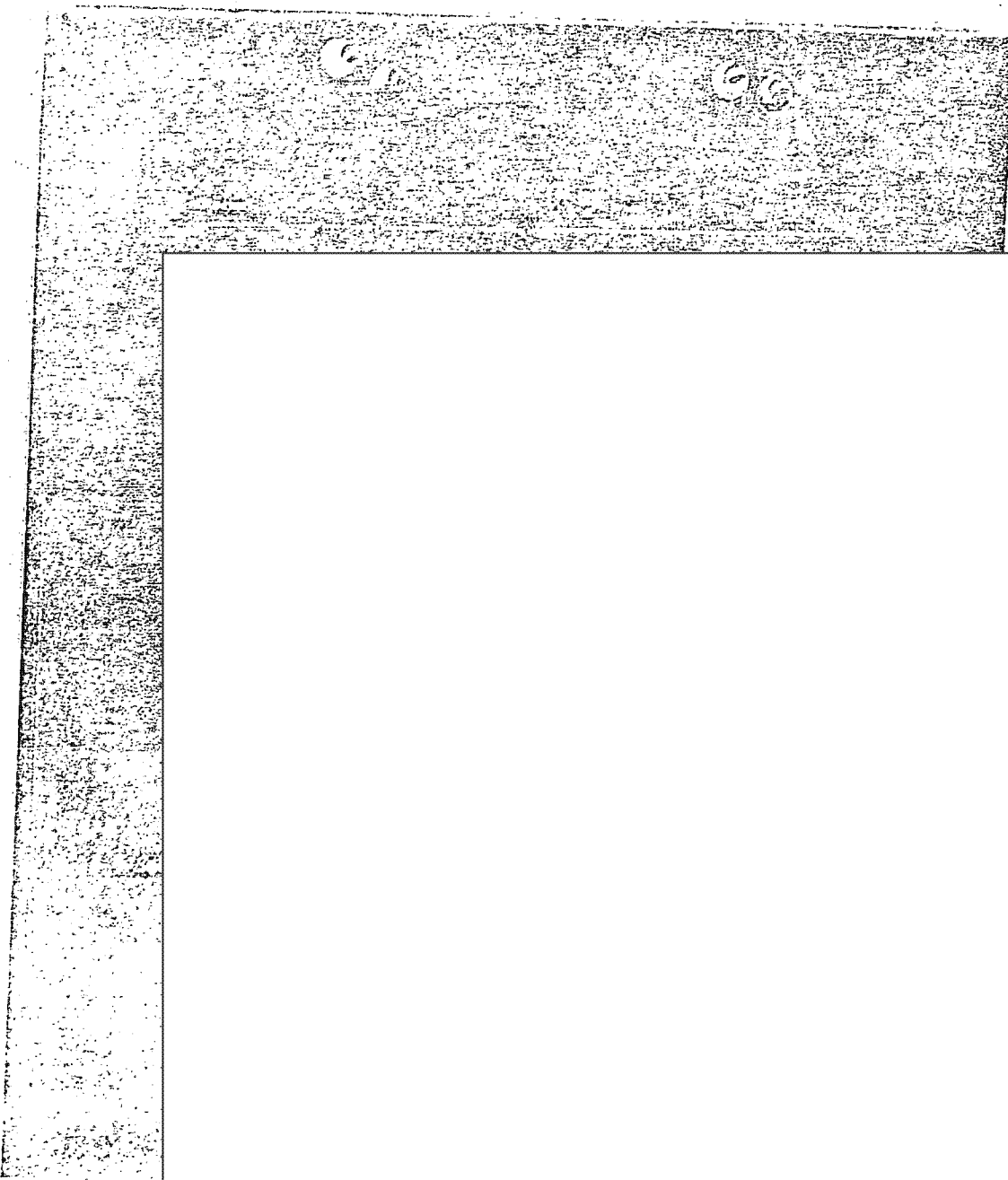


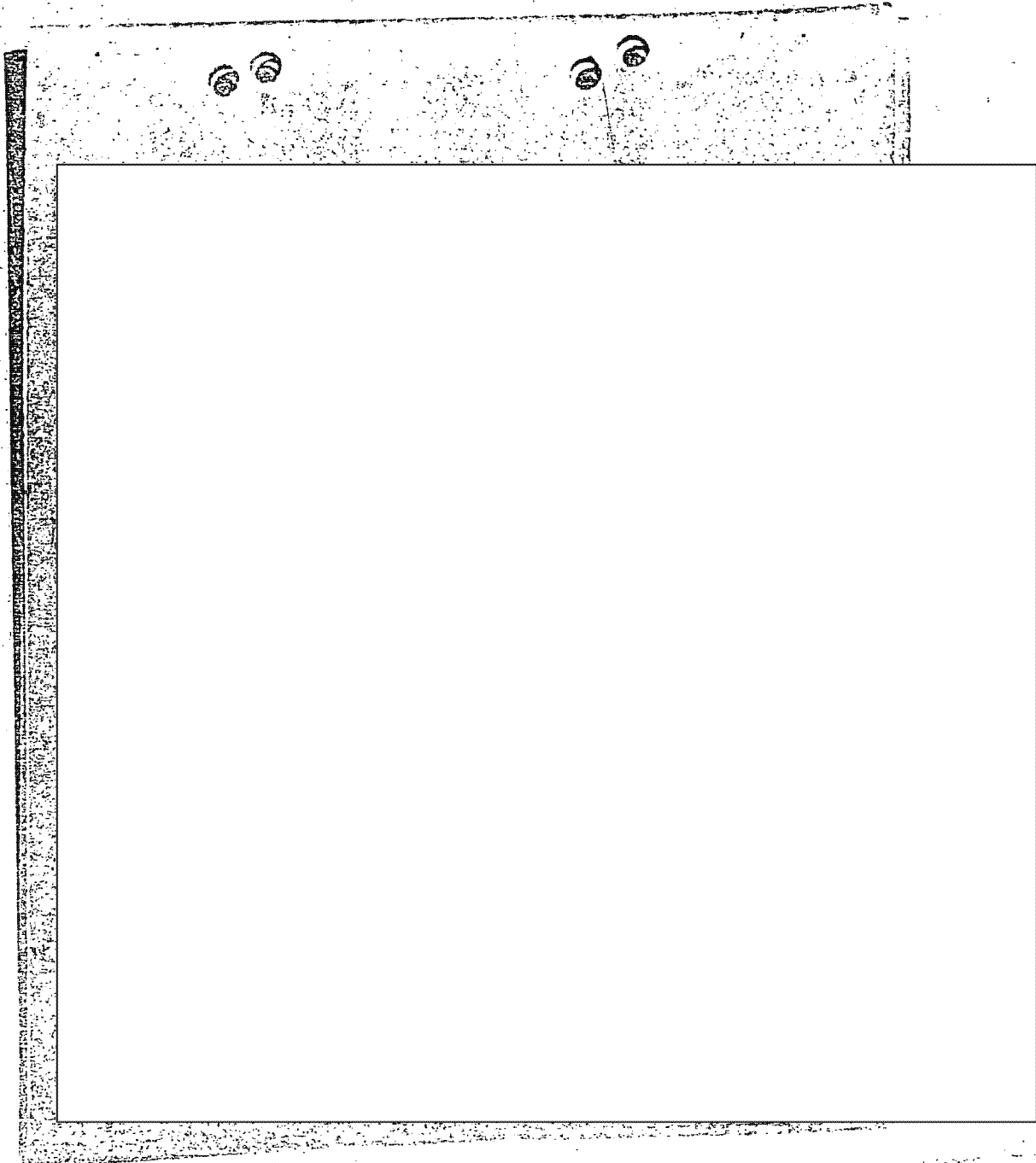


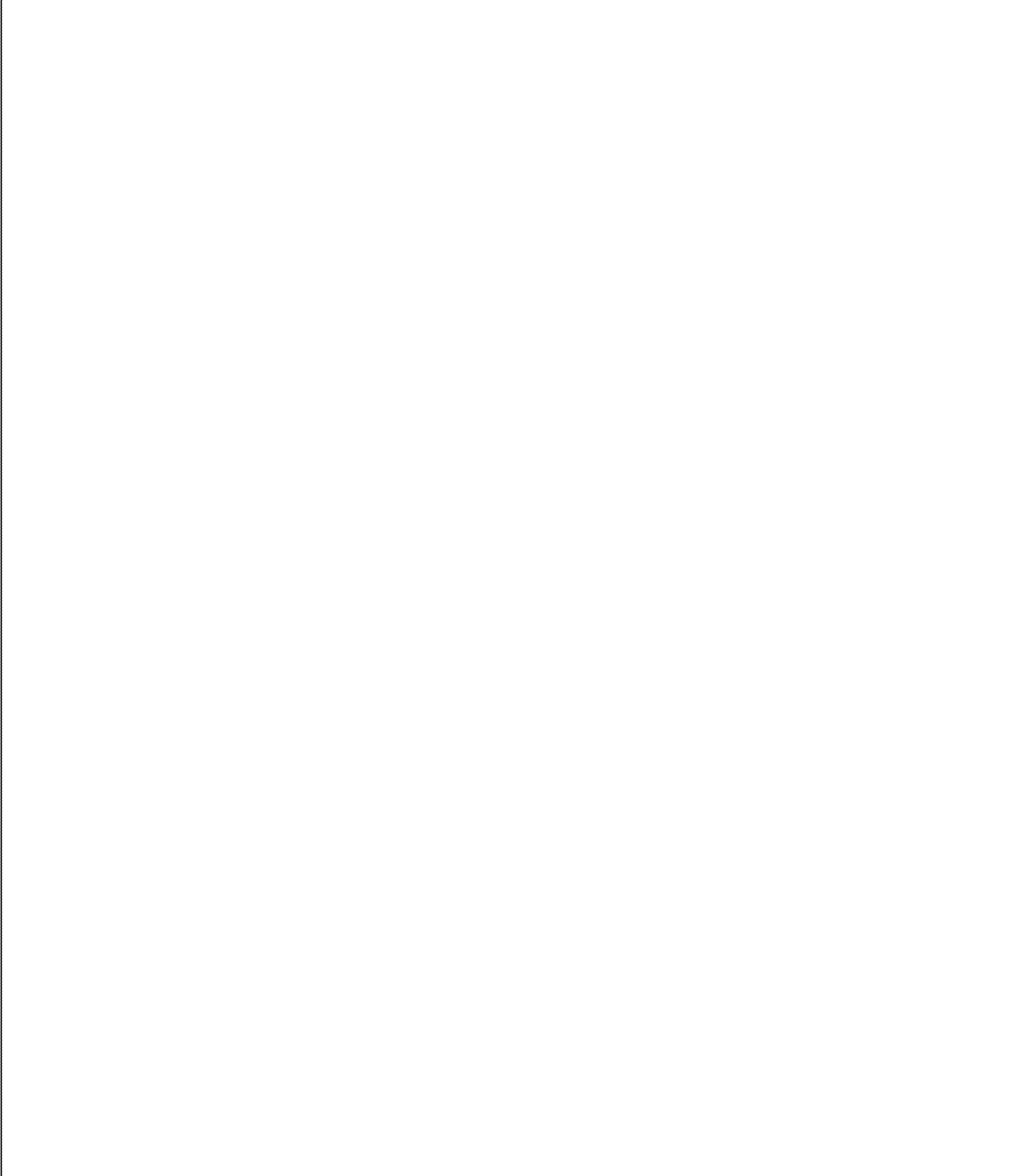


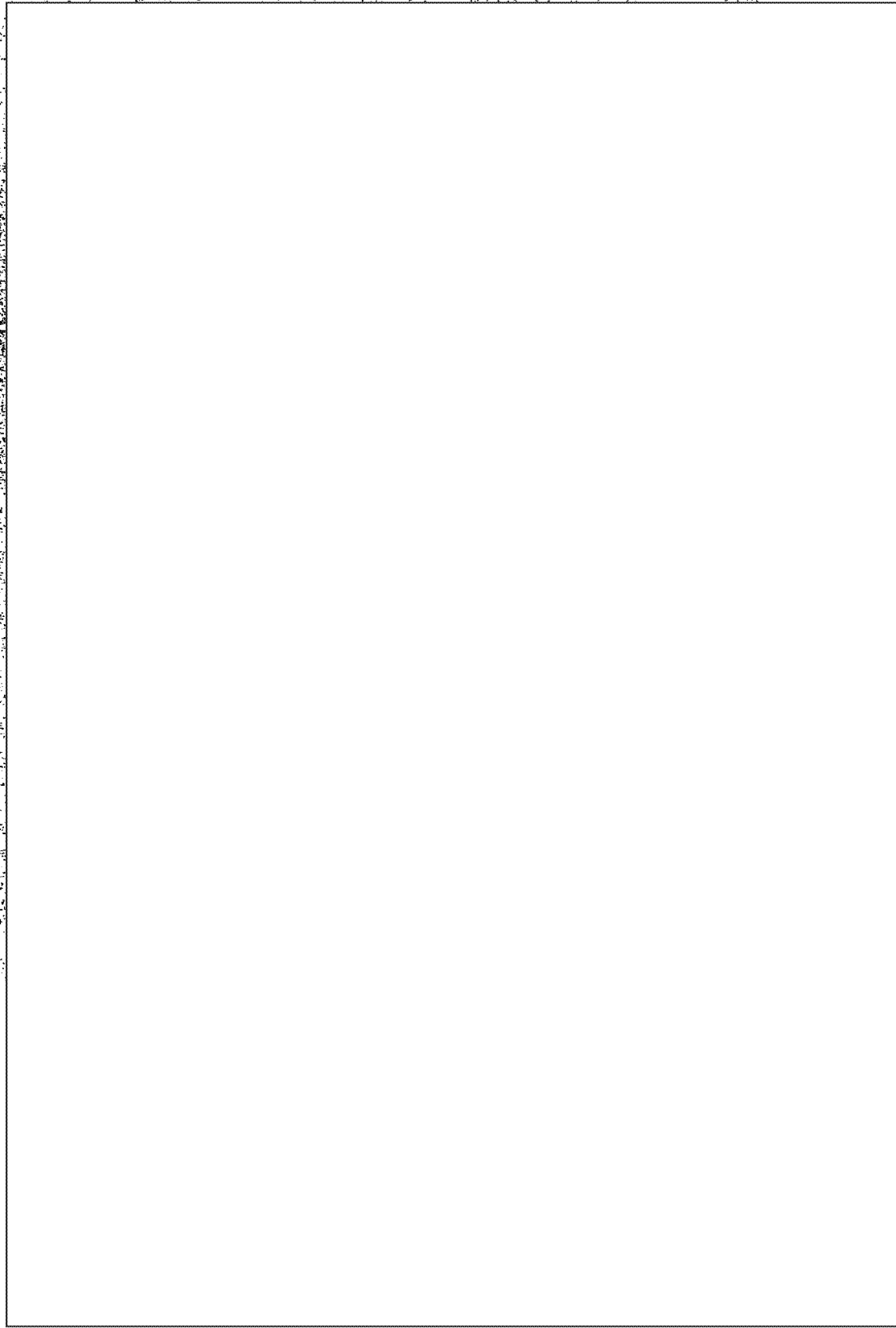
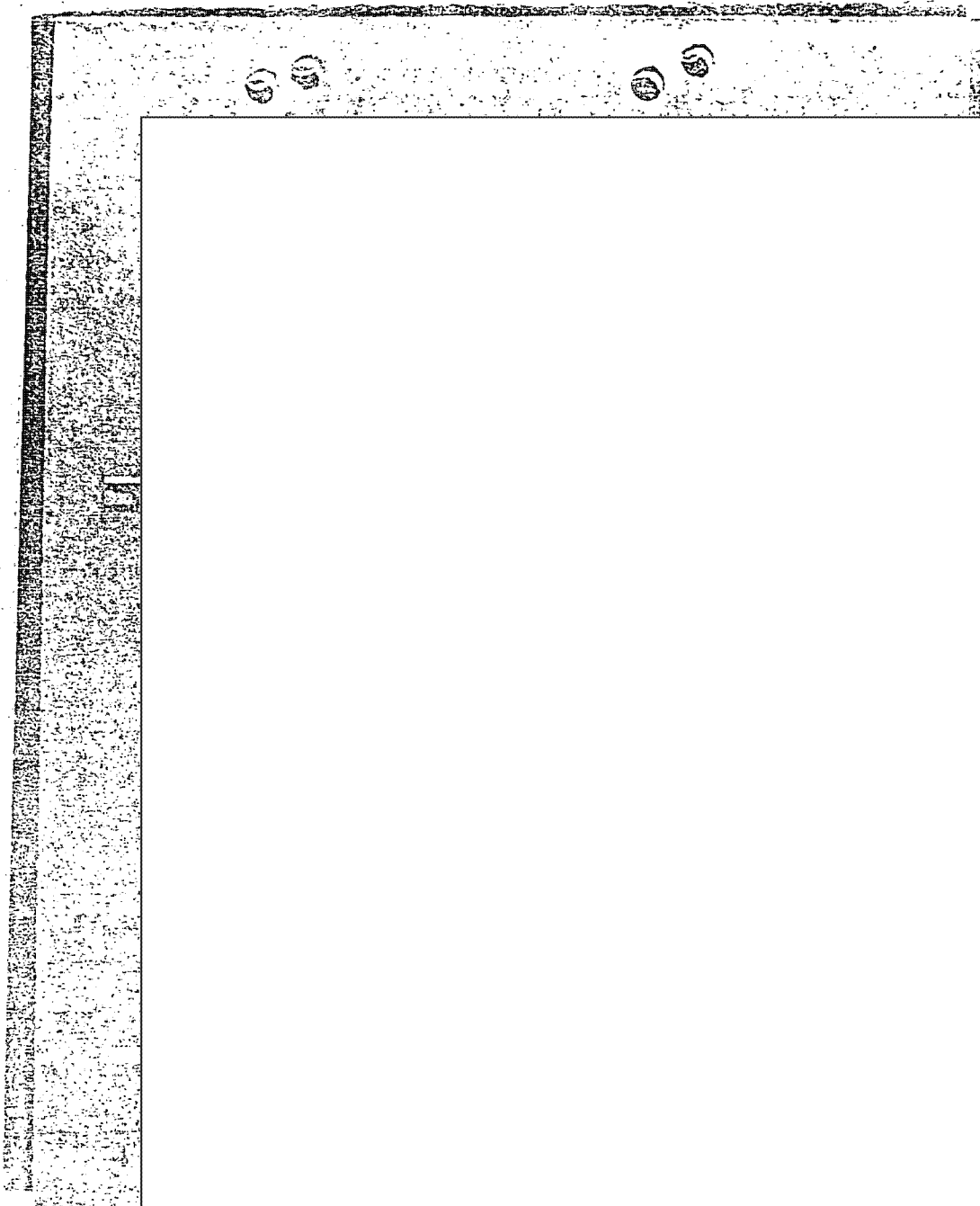


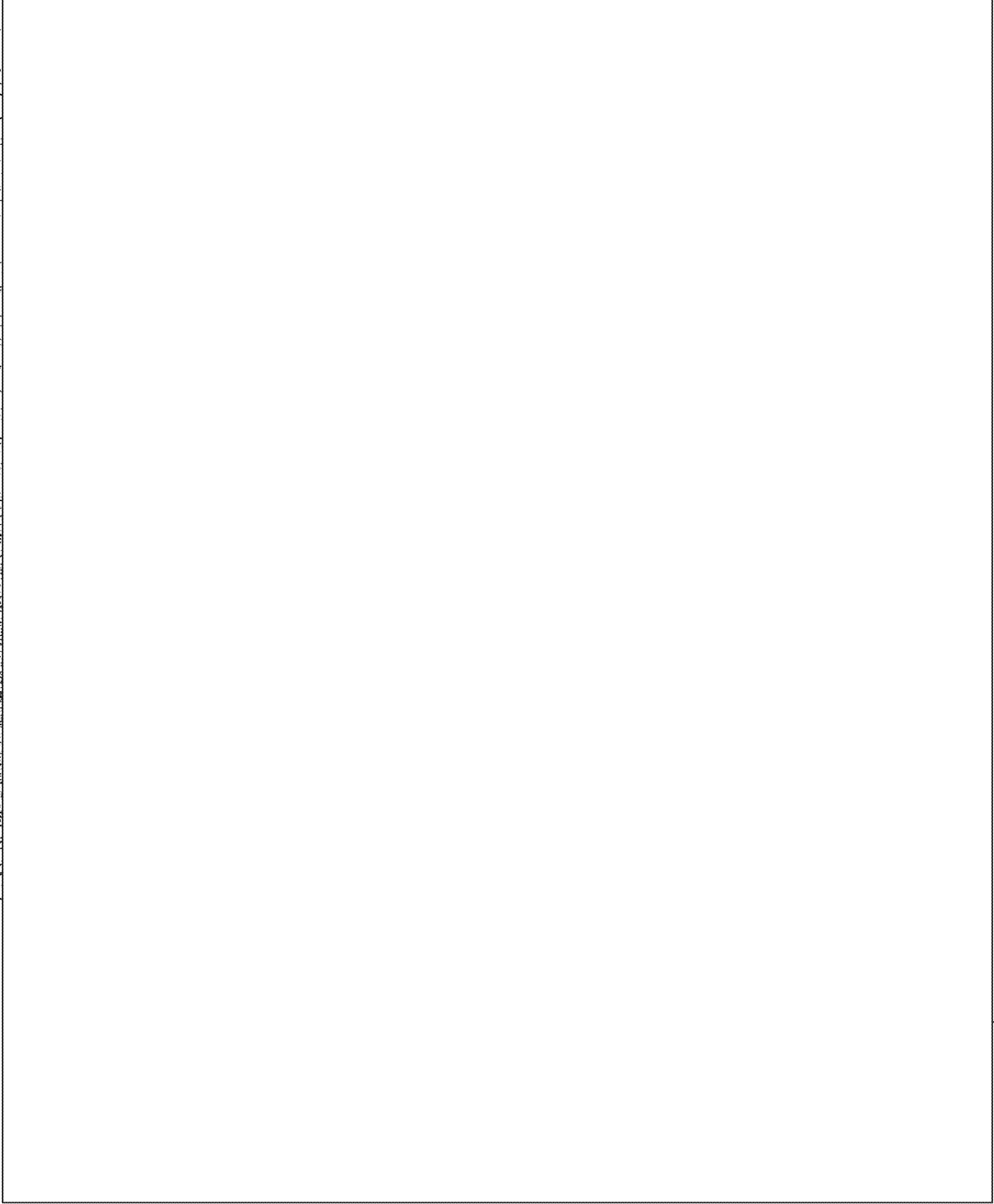
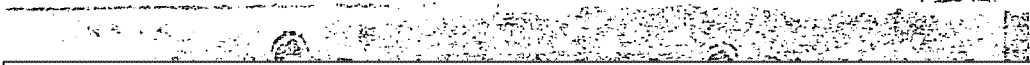


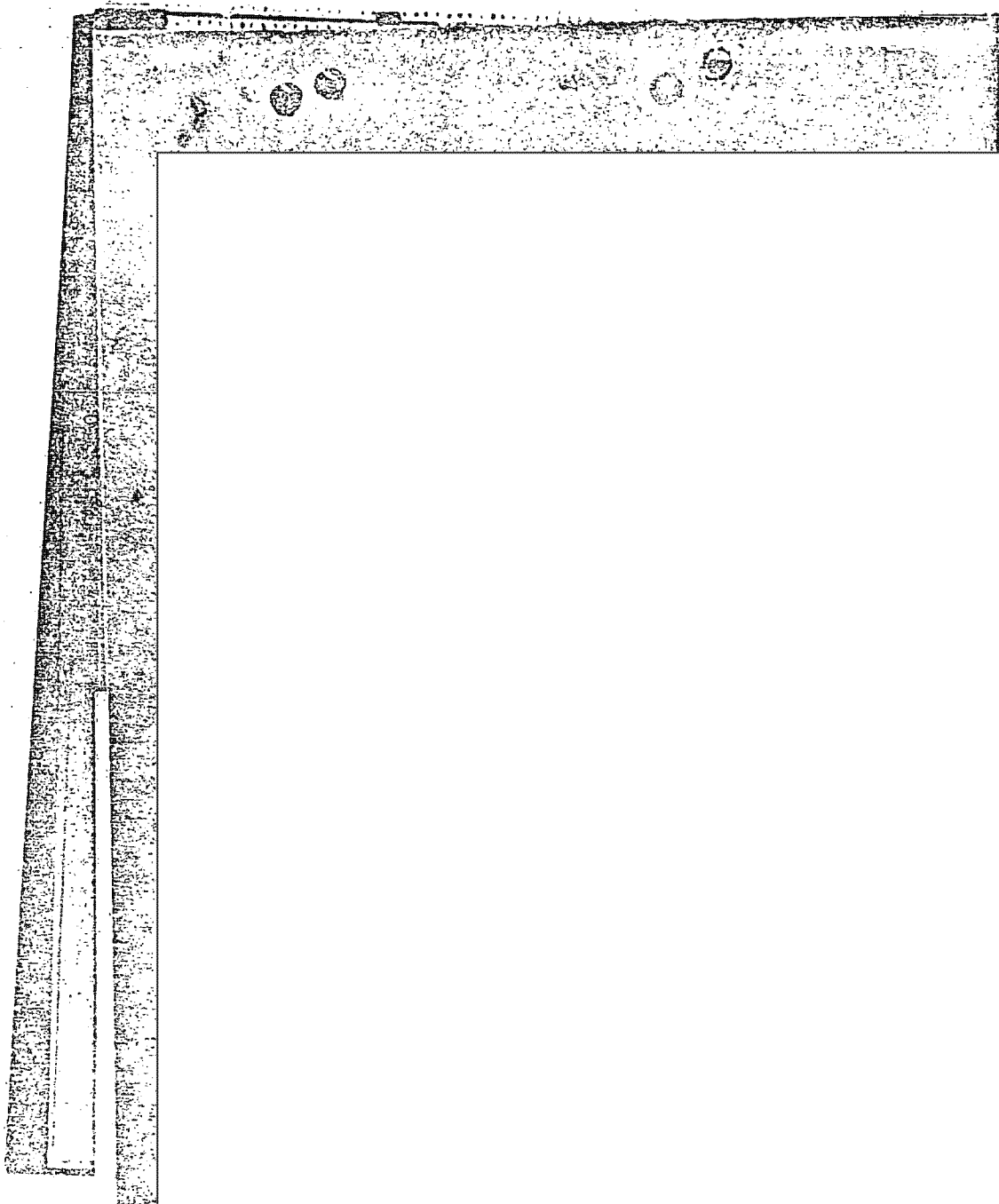


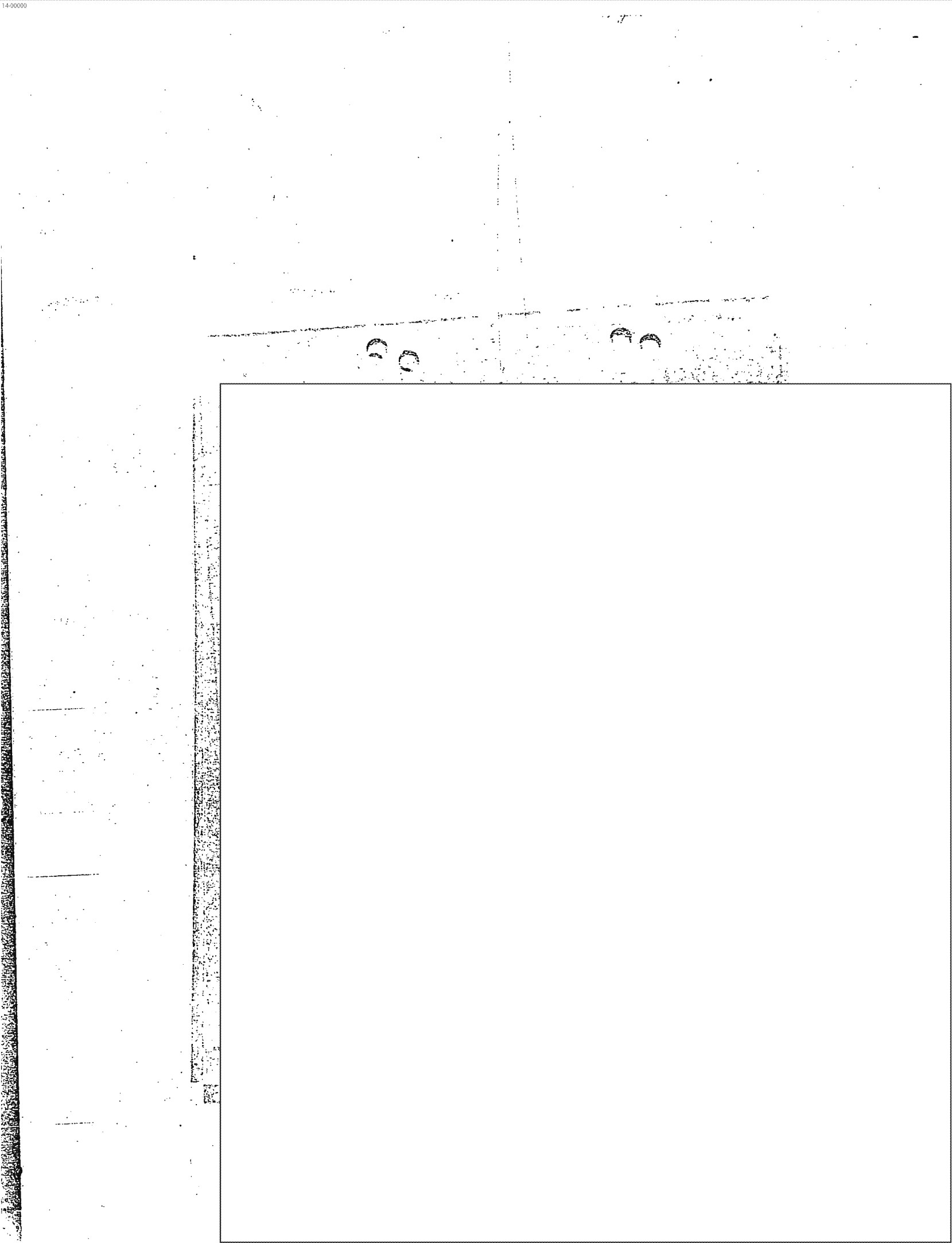














**SECRET**  
(When Filled In)

| <b>REQUEST FOR SECURITY CLEARANCE</b>  |  |  |  |   |  | REQUEST NO. (11-61)<br><b>42076</b>    |
|--|--|--|--|---|--|--|
| NAME <span style="float: right;">(12-68)</span>  |  |  |  |   |  | REQUEST DATE (9-11)<br><b>5 Aug 66</b> |
| POSITION TITLE<br><b>IO- Program Eval.</b>   |  | POSITION NUMBER (21-69)  |  | OCCUP. CODE (87-48)                           |  | GRADE (44-44)<br><b>GS-16</b>          |
| LOCATION (CITY, STATE, COUNTRY)<br><b>Washington, D.C.</b>   |  | ASSIGNMENT (OFFICE, DIVISION, BRANCH)<br><b>DCI/PPB/Planning &amp; Prog. Div/Prog. Anal. Br.</b> |  |   |  | UNSC. CODE (68-68)<br><b>Anal. Br.</b> |
| TYPE OF APPLICANT  |  | CONVERSION ACTION  |  | IF OTHER, SPECIFY:                            |  | TYPE OF APPL (46)                      |
| REGULAR <input type="checkbox"/>   |  | <input checked="" type="checkbox"/> SA-98  |  |   |  |  |
| CONTACT <input type="checkbox"/>   |  | CONSULTANT <input type="checkbox"/>  |  |   |  |  |
| MILITARY <input type="checkbox"/>  |  |  |  |   |  |  |
| NAME OF <span style="float: right;">(12-68)</span>   |  | TYPE OF ASSIGNMENT AND FUNDS   |  |   |  | HQTRS. & FUND (90)                     |
|  |  | NOB <input type="checkbox"/>   |  | USP <input type="checkbox"/>                  |  |  |
|  |  | PF <input type="checkbox"/>  |  | V <input type="checkbox"/>                    |  |  |
|  |  | UY <input type="checkbox"/>  |  |   |  |  |
| CLEARANCE REQUIRED   |  | PROVISIONAL FOR UNCLAS. NAME OF POOL OR GROUP  |  |   |  | CLEARANCE (91)                         |
|  |  | <b>Full Clearance</b>  |  |   |  |  |
| ATTACHMENTS  |  | PERSONAL HISTORY STATEMENT   |  | APPENDIX I                                    |  | REQUIRE. CODE (52-54)                  |
|  |  | PHOTOGRAPHS  |  | APPENDIX II                                   |  | VET. PREF. & SER (55)                  |
| VETERANS STATUS  |  | MALE - VETERAN <input type="checkbox"/>  |  | FEMALE - VETERAN <input type="checkbox"/>     |  |  |
|  |  | MALE - NON-VETERAN <input type="checkbox"/>  |  | FEMALE - NON-VETERAN <input type="checkbox"/> |  |  |
| <p>Security #: 6016</p> <p>Clearance memo to SA Branch/CFD<br/>Attn: <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px; vertical-align: middle;"></span><br/>5 8 69</p> |  |  |  |   |  |  |
| SPACE BELOW FOR OS USE ONLY  |  |  |  |   |  |  |

CONFIDENTIAL  
(When Filled In)

SECURITY APPROVAL

DATE : 30 July 1966

YOUR  
REFERENCE: 42076

CASE NO. : 60164

TO : Director of Personnel

ATTN :

SUBJECT :

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made for entrance on duty within 150 days, this approval becomes invalid.
3. As part of the entrance on duty processing:
  - A personal interview in the Office of Security must be arranged.
  - A personal interview is not necessary.
  - Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.
4. This is a Conversion case.

FOR THE DIRECTOR OF SECURITY:

Chief, Personnel Security Division

CONFIDENTIAL  
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 9 November 1964

YOUR REFERENCE: 15100

CASE NO. : 60154

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT :

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent GS-16, by DRR/DCD in the capacity of Operations Officer [redacted]

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

FORM 1989

CONFIDENTIAL

(9-40)

**SECRET**  
(When Filled In)

|  |  |  |                       |                        |            |
|--|--|--|-----------------------|------------------------|------------|
| <b>REQUEST FOR SECURITY CLEARANCE</b>  |  |  |                       | REQUEST NO. (11-2)     | 15100      |
|  |  |  |                       | REQUEST DATE (10-11)   | 5 Nov 1964 |
| NAME (LAST, FIRST, MIDDLE)   |  |  |                       |                        |            |
| POSITION TITLE   |  | POSITION NUMBER (01 - 99)  | DDOUP. CODE (97 - 42) | GRADE (43-44)          |            |
| Ops Officer  |  |  |                       | GS-16                  |            |
| LOCATION (CITY, STATE, COUNTRY)  |  | ASSIGNMENT OFFICE, DIVISION, BRANCH  |                       | OBSL. CODE (45-46)     |            |
|  |  | DDP/DOD  |                       |                        |            |
| TYPE OF APPLICANT  |  | CONVERSION SYSTEM  |                       | TYPE OF APPL. (48)     |            |
| <input checked="" type="checkbox"/> CIVILIAN<br><input type="checkbox"/> CONTRACT<br><input type="checkbox"/> MILITARY |  | SE9SA  |                       |                        |            |
| INDICATE NAME OF POOL OR GROUP   |  | TYPE OF ASSIGNMENT AND FUNDS   |                       | DDOCTR. & FUND (50)    |            |
| CPD  |  | HOS <input type="checkbox"/> SSP <input type="checkbox"/> PP <input type="checkbox"/> V <input type="checkbox"/> UV <input type="checkbox"/> |                       | CLEARANCE (51)         |            |
| CLEARANCE REQUIRED   |  | GOVERNMENT SECURITY CLEARANCE  |                       | SECRETARY CODE (52-53) |            |
|  |  |  |                       | FULL                   |            |
| ATTACHMENTS  |  | PERSONAL HISTORY STATEMENT   | APPENDIX I            | REQUEST FOR WAIVER     |            |
|  |  | PHOTOGRAPH(S)  | APPENDIX B            | REPORT OF INTERVIEW    |            |
| VETERANS STATUS  |  | MALE - VETERAN   | FEMALE - VETERAN      | VET PREF. & SER (54)   |            |
|  |  | MALE - NON-VETERAN   | FEMALE - NON-VETERAN  |                        |            |

Security #: 60164

Case Officer: [redacted] Code 11 x68060

Clearance memo to SA Branch/CPD

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CONFIDENTIAL

DATE 24 May 1959

PROT. 9-258

TO : FE

Director of Security

Director of Personnel

FROM : Chief, Communications Security Staff

SUBJECT: Notification of Cryptographic Clearance -

1. Subject employee has been granted a cryptographic clearance under the provisions of CIA Regulation 90-500. Clearance is effective 25 May 1959.

2. Subject has been informed of the granting of clearance, has been briefed concerning cryptographic and related communications security matters, and has signed a Briefing Statement acknowledging responsibility for the protection of cryptographic information.

3. When Subject employee no longer requires the clearance in order to perform his assigned duties, it is requested that the Communications Security Staff (2411 "F" Bldg., Ext. 3021) be notified by FE, that the clearance may be revoked.

FOR THE CHIEF, COMMUNICATIONS:

Distribution:

- 1 - FE
- 1 - Security Office (Briefing Statement attached)
- 1 - Personnel Office
- 1 - OC-S/PROT File

CONFIDENTIAL

*67  
Sec Div (11/1/52)*

**SECRET**  
CONFIDENTIAL  
SECURITY INFORMATION  
**SECURITY APPROVAL**

*div.*

Date: 28 July 1952

TO: Chief, Covert Personnel Division

Your Reference: L-5937-A

FROM: <sup>Acting</sup> Chief, Security Division

Case Number: 60164

SUBJECT:

1. This is to advise you of security action in the subject case as indicated below:
  - Security approval is granted the subject person for access to classified information.
  - Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
  - The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of paragraph H of Regulation 10-9.
2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.
3. Subject is to be polygraphed as part of the EOD procedures.



**SECRET**  
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**SECRET**  
SECURITY INFORMATION

*Office Memorandum* • UNITED STATES GOVERNMENT

TO : Chief, Covert Personnel Division

DATE: 8 May 1952

FROM : Chief, Personnel Security Branch

SUBJECT:  60164

Reference is made to a memorandum dated 1 May 1952 from Lloyd George, Chief, PE, which is as follows.

"1. Full security clearance was issued 11 March 1952 for Subject's employment in the field as an I.O. (CL) assigned

"3. It is therefore requested that Subject's security clearance be extended for a period of sixty days."

This is to advise that the security clearance granted 11 March 1952 is extended to 30 June 1952.

**SECRET**

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~~CONFIDENTIAL~~  
SECURITY APPROVAL

mc

Date: 11 March 1952

TO: Chief, Covert Personnel Division

Your Reference: L-5937

FROM: Chief, Security Division

Case Number: 60164

SUBJECT:

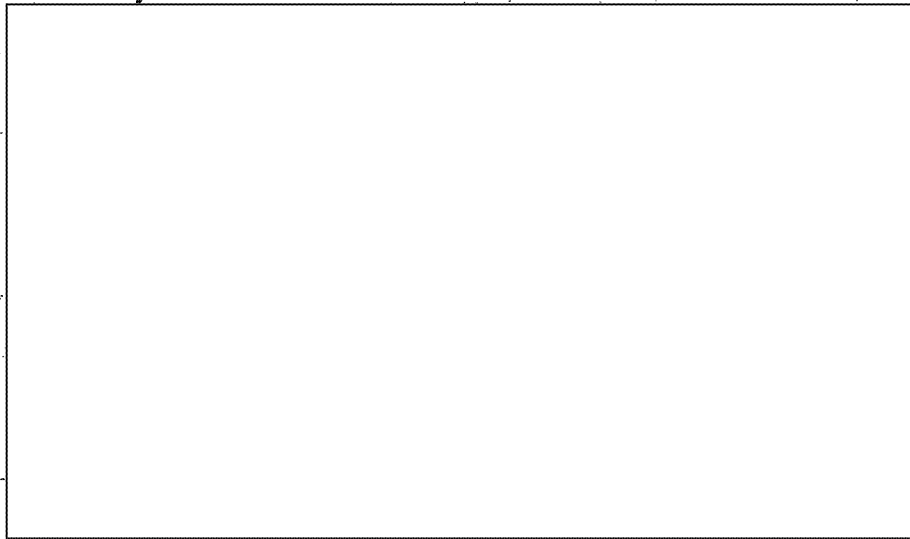
1. This is to advise you of security action in the subject case as indicated below:

Security approval is granted the subject person for access to classified information.

Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.

The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.



~~CONFIDENTIAL~~

f



RECORD OF  
PREVIOUS GOVERNMENT  
SERVICE RETURNED TO  
FEDERAL RECORDS CENTER IN  
ST. LOUIS, MO.

DATE 1 OCT 1974 *Wick*